Case 19-68451-lrc Doc 1 Filed 11/15/19 Entered 11/15/19 16:19:57 Desc Main Document Page 1 of 71

Fill in this information to identify your case:		
United States Bankruptcy Court for the: Northern District of: Georgia (State)	_	
Case number (if known)	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name	Lura First name	First name
Write the name that is on your government-issued picture identification (for	A. Middle name	Middle name
example, your driver's license or passport	Johnson Last name	Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
All other names you have used in the last	Lura First name	First name
8 years Include your married or	Ann Middle name Johnson	Middle name
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your Social	XXX - XX- 9535	xxx - xx
Security number or federal Individual	OR	OR
Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

Debtor 1 Lura First Name	A. Middle Name	Last Name	Case number (if know	vn)	
- Het Halle	·····dale Haile				
	About Debtor 1:		About Debtor	2 (Spouse Only i	n a Joint Case):
Any business names and Employer	I have not used any business	names or EINs.	I have not u	sed any business na	ames or EINs.
Identification Numbers (EIN) you have used in the last	Business name		Business name	Э	
8 years	Business name		Business name	Э	
Include trade names and doing business as names	EIN		EIN		
	EIN		EIN		
5. Where you live			If Debtor 2 lives	s at a different add	ress:
	2238 Scarbrough Dr.30088 Number Street		Number	Street	
	Stone Mountain Georgia City State	30088 Zip Code	City	State	Zip Code
	De Kalb	Σiβ Code	City	Sidle	Zip Code
	County If your mailing address is different above, fill it in here. Note that the notices to you at this mailing add	he court will send any		ote that the court w	different from yours, ill send any notices to
	PO Box 1496 Number Street		Number	Street	
	Lithonia Georgia City State	30058 Zip Code	City	State	Zip Code
6. Why you are	,	Zip oode		Otate	Zip oode
choosing this district to file for bankruptcy	Check one: Over the last 180 days before	filing this petition. I have	Check one:	t 180 days hefore fil	ing this petition, I have
to file for bankruptcy	lived in this district longer that	n in any other district.	lived in this	district longer than in	n any other district.
	I have another reason. Explain	n. (See 28 U.S.C. §§ 1408.)	I have anoth	ner reason. Explain. (See 28 U.S.C. §§ 1408.)

Debtor 1 Lur		A.		Johnson		Case number (if kno	own)	
	st Name	Middle Nan		Last Name				
Part 2: Te	II the Court Abo	ut Your Bankrup	tcy Case					
Bankru	apter of the ptcy Code you posing to file	Check one. (For a Bankruptcy (Form Chapter 7 Chapter 11 Chapter 12 Chapter 13						ndividuals Filing for
8. How yo	u will pay the	more details cashier's che may pay with I need to pay Individuals to judge may, b the official poyou choose to	about how you book, or money on a credit card of the fee in instance of the fee be wout is not require overty line that	may pay. Typi rder. If your att ir check with a tallments. If you ng Fee in Install aived (You may ed to, waive you applies to your must fill out the	cally, if your corney is a pre-print of the court choose of the court choose of the court choose of the court cour	ou are paying the submitting your ed address. ethis option, sign official Form 103 this option only ad may do so on ize and you are to	e fee yourself, payment on y gn and attach t BA). If you are filing the your incorunable to pay the payment of	ice in your local court for you may pay with cash, our behalf, your attorney the Application for ng for Chapter 7. By law, a me is less than 150% of the fee in installments). If filling Fee Waived (Official
	ou filed for ptcy within the ears?	No. ✓ Yes. District District	Northern Distric		When When When	4/13/2016 MM / DD / YYYY 9/6/2016 MM / DD / YYYY	Case number Case number Case number	16-56516 16-65731
cases p being fi spouse filing th you, or	bankruptcy bending or led by a who is not is case with by a business c, or by an	✓ No. Yes. Debtor District Debtor District			When When	MM / DD / YYYY	Relationship to Case number, Relationship to Case number,	if known
11. Do you residen		✓ No.	r landlord obtain Go to line 12.	atement About a			<i>st You</i> (Form 10	1A) and file it with

Debtor 1	Lura First Name		A.		Johnson Last Name	Case number	r (if known)	
Dowl Or		Duoin						
Part 3:	Report About Any	DUSII	iesses	You Own as a Sole	Proprietor			
	you a sole orietor of any full-	✓	No.	Go to Part 4.				
	art-time iness?		Yes.	Name and location of	f business			
is a	ole proprietorship business you			Name of business, if a	any			
indiv sepa such	rate as an vidual, and is not a arate legal entity n as a corporation, nership, or LLC.			Number	Street			
	ou have more than sole			City		State	Zip Code	
prop	orietorship, use a arate sheet and			Check the appropri	ate box to describ	be your business:		
	ch it to this			Health Care B	usiness (as define	ed in 11 U.S.C. § 101	(27A))	
petit	tion.			Single Asset R	eal Estate (as def	ined in 11 U.S.C. § 10	01(51B))	
				Stockbroker (as defined in 11 L	J.S.C. § 101(53A))		
				Commodity B	roker (as defined	in 11 U.S.C. § 101(6)))	
				None of the ab	oove			
Cha Ban are busi For sma see 101	you filing under apter 11 of the kruptcy Code and you a small iness debtor? a definition of all business debtor, 11 U.S.C. § (51D).	apprishee exist	ropriate t, state t, follow No. No. Yes.	ment of operations, ca the procedure in 11 L I am not filing under (I am filing under Cha Bankruptcy Code.	cate that you are a sh-flow statement. I.S.C. § 11 16(1)(E) Chapter 11. pter 11, but I am apter 11 and I am a	a small business debt t, and federal income B). NOT a small business a small business debt	tor, you must attach tax return or if any additional tax returns the additional ta	to the definition in the Bankruptcy
14. Do y	ou own or have		No.					
pos	property that es or is alleged to e a threat of	✓		What is the hazard?				
imm iden	ninent and ntifiable hazard to			If immediate attention is	needed, why is it r	needed?		
-	lic health or ety? Or do you			Where is the property?				
own that	any property needs immediate ntion?			milia ia tila piopaty .	Number	Street		
own or li be f	example, do you n perishable goods, vestock that must ed, or a building needs urgent nirs?				City	Sta	te	Zip Code

Case 19-68451-lrc Doc 1 Filed 11/15/19 Entered 11/15/19 16:19:57 Desc Main Document Page 5 of 71

Debtor 1 Lura A. Johnson Case number (if known)

First Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have ✓ I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you plan, if any. plan, if any. are not eligible to file. I certify that I asked for credit counseling services ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental I have a mental illness or a mental Incapacity. Incapacity. deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. Disability. My physical disability causes me to Disability. My physical disability causes me to be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

Debtor 1 Lura			number (if known)
Part 6: First Name Answer These Que	Middle Name La estions for Reporting Purposes	ast Name	
16. What kind of debts do you have?	16a. Are your debts primarily of "incurred by an individual property No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily by	primarily for a personal, fami business debts? Business of evestment or through the ope	debts are debts that you incurred to obtain eration of the business or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that fur No.		y exempt property is excluded and administrative te to unsecured creditors?
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 m \$10,000,001-\$50 \$50,000,001-\$100 \$100,000,001-\$50	million
20. How much do you estimate your liabilities to be?	□ \$0-\$50,000 ☑ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 m \$10,000,001-\$50 \$50,000,001-\$100 \$100,000,001-\$50	million
Part 7: Sign Below			
For you	correct. If I have chosen to file under Chaof title 11, United States Code. I under Chapter 7. If no attorney represents me and	apter 7, I am aware that I may I understand the relief availal	perjury that the information provided is true and y proceed, if eligible, under Chapter 7, 11,12, or 13 ole under each chapter, and I choose to proceed y someone who is not an attorney to help me fill
	out this document, I have obtain	•	
	I understand making a false state connection with a bankruptcy caboth. 18 U.S.C. §§ 152, 1341, 1	ement, concealing property, ase can result in fines up to 9 519, and 3571.	ted States Code, specified in this petition. or obtaining money or property by fraud in \$250,000, or imprisonment for up to 20 years, or
	/s/ Lura Johnson	*	
	Signature of Debtor 1		Signature of Debtor 2
	Executed on11/15/2019 MM / DD /		Executed on

Debtor 1 Lura	A.	Johnson	Case number (if k	rnown)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed un	der Chapter 7, 11, 1	2, or 13 of title 11, United	ave informed the debtor(s) about I States Code, and have explained the so certify that I have delivered to the
If you are not	debtor(s) the notice requ	uired by 11 U.S.C. §	342(b) and, in a case in w	hich § 707(b)(4)(D) applies, certify that I
represented by an	have no knowledge afte	r an inquiry that the	information in the schedu	ules filed with the petition is incorrect.
attorney, you do not				·
need to file this page.	/s/ Willie Bruce Smi	th	Date	11/15/2019
	Signature of Attorney		MI	M / DD / YYYY
	Willie Bruce Smith			
	Printed name			
	Semrad Law Firm			
	Firm name			
	303 Perimeter Center	North		
	Street			
	Suite 201			
	<u></u>			
	Atlanta		Georgia	30346
	City		State	Zip Code
	Contact phone	6786687166	Email address	wbsmith@semradlaw.com
	507412		Georgi	a
	Bar number		State	

1 111 111 1	this infor						
Debto	or 1	Lura First Name	A. Middle Na	Johnson ame Last Nam			
Debto		First Name	Middle Na	ame Last Nam	e		
(Spous	e, if filing)	First Name	Middle Na	ame Last Nam	е		
United	d States B	Bankruptcy Court for the	: Northern	District of Geor			
Case (If know	number ⁄n)				·		
Offi	icial	Form 107					Check if this is amended filing
Stat	teme	nt of Financi	al Affairs fo	or Individuals	Filing for Bar	kruptcy	04
inforn	nation. It		led, attach a sepai				le for supplying correct , write your name and case
Part	1: Give	Details About You	r Marital Status a	and Where You Lived	Before		
1.	What is	your current marital s	tatus?				
	☐ Mar	rried					
	✓ Not	married					
2.	ت		you lived anywhere	other than where you liv	ve now?		
2.	ت		you lived anywhere	other than where you liv	ve now?		
2.	During t	he last 3 years, have y	- -	other than where you liv 3 years. Do not include v			
2.	During t	he last 3 years, have y	- -				
2.	During t No Yes	he last 3 years, have y	- -				Dates Debtor 2 lived there
2.	During t No Yes	he last 3 years, have y	- -	3 years. Do not include v	where you live now.	1	
2.	During t No Yes Deb	he last 3 years, have y b. List all of the places y	- -	3 years. Do not include v	where you live now. Debtor 2: Same as Debtor	1	there
2.	During t No Yes Deb	he last 3 years, have y	- -	3 years. Do not include v Dates Debtor 1 lived there	where you live now. Debtor 2:	1	Same as Debtor 1
2.	During t No Yes Deb	he last 3 years, have you	- -	3 years. Do not include v Dates Debtor 1 lived there	where you live now. Debtor 2: Same as Debtor		Same as Debtor 1 From To
2.	During t No Yes Deb	he last 3 years, have you	- -	3 years. Do not include v Dates Debtor 1 lived there	Debtor 2: Same as Debtor Number Street City Sta	te Zip Co	Same as Debtor 1 From To
2.	During t No Yes Deb	he last 3 years, have you	you lived in the last 3	3 years. Do not include v Dates Debtor 1 lived there	Debtor 2: Same as Debtor Number Street	te Zip Co	Same as Debtor 1 From To
2.	During t No Yes Deb	he last 3 years, have you	you lived in the last 3	3 years. Do not include v Dates Debtor 1 lived there	Debtor 2: Same as Debtor Number Street City Sta	te Zip Co	Same as Debtor 1 From To
2.	During t No Yes Deb	he last 3 years, have you. List all of the places your 1:	you lived in the last 3	3 years. Do not include v Dates Debtor 1 lived there From To	Debtor 2: Same as Debtor Number Street City Sta	te Zip Co	there Same as Debtor 1 From To Same as Debtor 1
2.	During t No Yes Deb	he last 3 years, have you. List all of the places your 1:	you lived in the last 3	3 years. Do not include v Dates Debtor 1 lived there From To	Debtor 2: Same as Debtor Number Street City Sta	ite Zip Co	there Same as Debtor 1 From To Same as Debtor 1 From Tro Tro Tro Tro

Deb	tor 1	Lura A.	Johnso		umber (if known)	
		First Name Middle	e Name Last Na	me		
Part	2:	Explain the Sources of Your Inc	come			
4.	Fill i	you have any income from employm n the total amount of income you receiv rities. If you are filing a joint case and yo No Yes. Fill in the details.	ved from all jobs and all busi	inesses, including part-time		rs?
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		om January 1 of current year until e date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$55517.38	Wages, commissions, bonuses, tips Operating a business	
		or last calendar year: anuary 1 to December 31,	Wages, commissions, bonuses, tips Operating a business	\$66000.00	Wages, commissions, bonuses, tips Operating a business	
		or the calendar year before that: anuary 1 to December 31, 2017) YYYY	✓ Wages, commissions, bonuses, tips Operating a business	\$67000.00	Wages, commissions, bonuses, tips Operating a business	
	Inclu publi filing List e	you receive any other income during de income regardless of whether that in it benefit payments; pensions; rental incapinate a joint case and you have income that each source and the gross income from No Yes. Fill in the details.	ncome is taxable. Examples come; interest; dividends; m you received together, list it	of other income are alimony; noney collected from lawsuits; only once under Debtor 1.	royalties; and gambling and lot	
			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
		rom January 1 of current year until ne date you filed for bankruptcy:				
		or last calendar year: anuary 1 to December 31, 2018) YYYYY				
		or the calendar year before that: lanuary 1 to December 31, 2017) YYYY				

Case 19-68451-lrc Doc 1 Filed 11/15/19 Entered 11/15/19 16:19:57 Desc Main Document Page 10 of 71

Debtor 1 Lura Johnson Case number (if known) First Name Last Name Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Amount you still owe Was this payment Dates of payment Total amount paid for Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment

City

State

Zip Code

Suppliers or

vendors
Other

	Lura		A.		nson	Case number ((if known)
	First Name		Middle Name	Last	Name		
į	ders include your poorations of which	relatives; ar you are ar or a busin	ny general partners n officer, director, p ess you operate as	; relatives of any g erson in control, o	eneral partners; par or owner of 20% or	tnerships of which y more of their voting	who was an insider? ou are a general partner; securities; and any managing domestic support obligations,
1	No Yes. List all pay	ments to a	ın insider.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	hin 1 year before der?	you filed	for bankruptcy, d	id you make any	payments or trans	sfer any property o	n account of a debt that benefited an
nclu		debts guar	ranteed or cosigned	d by an insider.			
4	No Yes. List all payr	nents that	benefited an insid	der.			
	, ,			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
							Include creditor's name
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				

Case 19-68451-lrc Doc 1 Filed 11/15/19 Entered 11/15/19 16:19:57 Desc Main Document Page 12 of 71

Debtor 1 Lura Johnson Case number (if known) First Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded Citv State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished.

City

State

Zip Code

Property was attached, seized, or levied.

Debt		Lura	A.	Johnson	Case number (if known)	
		First Name	Middle Name	Last Name			_
11.		thin 90 days before you file counts or refuse to make a			eank or financial institution,	set off any amou	nts from your
	✓	No					
	П	Yes. Fill in the details.					
		•		Describe the action the	e creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street					
				Last 4 digits of account	number: XXXX-		
		City State	Zip Code				
12.	Wit			any of your property in the	possession of an assignee for	or the benefit of o	creditors, a court-
		pointed receiver, a custodi					,
	✓	No					
	Ш	Yes					
Part	5:	List Certain Gifts and	Contributions				
13.	Wi	thin 2 years before you file	ed for bankruptcy, did	you give any gifts with a to	otal value of more than \$60	0 per person?	
	✓	No No					
	Ė	Yes. Fill in the details for	each gift.				
		Gifts with a total value of per person	f more than \$600	Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You Gave	e the Gift				
		Number Street					
		City State	Zip Code				
		Person's relationship to yo	u				
		Person to Whom You Gave	e the Gift				
			o ano diit				
		Number Street					
		City State	Zip Code				
		Person's relationship to yo	u				

ebtor 1	Lura	A.	Johnson C	Case number (if known)	
	First Name	Middle Name	Last Name		
	ukt. O k. f	Challe de la		The state of the s	
Wi	thin 2 years before you	i filed for bankruptcy, did	d you give any gifts or contributions w	ith a total value of more than \$600	to any charity?
✓	No				
	Yes. Fill in the details	for each gift or contribut	tion.		
	Gifts or contributions	s to charities	Describe what you contributed	Date you	Value
	that total more than	\$600		contributed	
	Charity's Name		_		
			_		
			_		
	Number Street				
	City Sta	ate Zip Code	-		
		,			
rt 6:	List Certain Losses	6			
	:hin 1 year before you f nbling?	filed for bankruptcy or si	ince you filed for bankruptcy, did you	lose anything because of theft, fire,	, other disaster, or
✓	No				
	Yes. Fill in the details.	•			
	Describe the propert		Describe any insurance coverage		Value of property
	how the loss occurre	ed	Include the amount that insurance pending insurance claims on line 3		lost
			A/B: Property.	of ouredule	
✓	No Yes. Fill in the details.				
			Description and value of any pro	perty Date payment	Amount of
			transferred	or transfer	payment
				was made	
	Person Who Was Paid		_		<u> </u>
	T CISOTI VVIIO VVAS I AIG				
	Number Street		_		
			_		
			_		
	City Sta	ate Zip Code			
	Email or website addre	ess	-		
			_		
	Person Who Made the	Payment, if Not You			
	Person Who Was Paid		_		
	i eisoii vviiu vvas Palu				
	Number Street		_		
			_		
			_		
	City Sta	ate Zip Code			
	Email or website addre	299	-		
	Email of Website addite				
	Person Who Made the	Payment, if Not You	_		

			Johnson	Case num	1001 (111010111)			
	First Name	Middle Name	Last Name					
he	ithin 1 year before you filed Ip you deal with your credionot include any payment or	tors or to make paym		your behalf pay	or transfer a	ny property to a	anyone v	who promised t
V	No							
Ë	Yes. Fill in the details.							
_	•		Description and value of	f any property		Date	Amou	nt of payment
			transferred			payment or		
						transfer was made		
	Person Who Was Paid							
	Number Street							
	City State	Zip Code						
an	d transfers that you have alrea No Yes. Fill in the details.	ady listed on this stater	nent.					
	•		Description and value o	f property D	escribe any	property or		Date
			transferred	р		eived or debts p	oaid	transfer was made
					cxonunge			maac
	Person Who Received Tran	ofor	•					
	Person who Received Train	15161						
	Number Street	15161						
		isiei						
	Number Street							
		Zip Code						
	Number Street City State	Zip Code u						
	Number Street City State Person's relationship to yo	Zip Code u						
	Number Street City State Person's relationship to yo Person Who Received Trans	Zip Code u						
	Number Street City State Person's relationship to yo Person Who Received Trans	Zip Code u nsfer Zip Code						
be	Number Street City State Person's relationship to yo Person Who Received Tran Number Street City State Person's relationship to yo	Zip Code u Zip Code u Zip Code u ed for bankruptcy, die	d you transfer any property t	o a self-settled t	trust or simil	ar device of whi	ich you a	are a
be	Number Street City State Person's relationship to yo Person Who Received Tran Number Street City State Person's relationship to yo thin 10 years before you filtereficiary?	Zip Code u Zip Code u Zip Code u ed for bankruptcy, die	d you transfer any property t	o a self-settled t	trust or simil	ar device of whi	ich you a	are a
be	Number Street City State Person's relationship to you Person Who Received Transtructure Number Street City State Person's relationship to you (thin 10 years before you filtereficiary? In the same of the called asset-productions are of the called asset-productions are of the called asset-productions are of the called asset-productions.)	Zip Code u Zip Code u Zip Code u ed for bankruptcy, die	d you transfer any property t	o a self-settled t	trust or simil	ar device of whi	ich you a	are a
be	Number Street City State Person's relationship to yo Person Who Received Tran Number Street City State Person's relationship to yo ithin 10 years before you filtereficiary? nese are often called asset-pro	Zip Code u Zip Code u Zip Code u ed for bankruptcy, die	d you transfer any property t			ar device of whi	ich you a	Date transfer was made
be	Number Street City State Person's relationship to yo Person Who Received Tran Number Street City State Person's relationship to yo ithin 10 years before you filtereficiary? nese are often called asset-pro	Zip Code u Zip Code u Zip Code u ed for bankruptcy, die				ar device of whi	ich you a	Date transfer was

Case 19-68451-lrc Doc 1 Filed 11/15/19 Entered 11/15/19 16:19:57 Desc Main Document Page 16 of 71

Debtor 1 Lura Johnson Case number (if known) First Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance number instrument account was before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code State Zip Code 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Yes Number Street Number Street Citv State 7in Code

City

State

Zip Code

	Lura A.	Johnson Case number (if known)	
	First Name Middle Name	e Last Name	
t 9:	Identify Property You Hold or Contr	rol for Someone Else	
	<u> </u>		
Do	you hold or control any property that son	meone else owns? Include any property you borrowed from, are storing for, o	r hold in trust for
sor	meone.		
	l No		
✓	No		
	Yes. Fill in the details.		
		Where is the property? Describe the contents	Value
	Owner's Name	NumberStreet	
		<u> </u>	
	Number Street		
		City State Zip Code	
	City State Zip Code	_	
	Oity State Zip Gode		
t 10:	Give Details About Environmental	Information	
the p	ourpose of Part 10, the following definitions a	apply:	
■ <i>F</i>	Environmental law means any federal state of	or local statute or regulation concerning pollution, contamination, releases of	
		aterial into the air, land, soil, surface water, groundwater, or other medium,	
ir	ncluding statutes or regulations controlling th	ne cleanup of these substances, wastes, or material.	
. 5	Site means any location facility or property as	is defined under any environmental law, whether you now own, operate, or utilize it	
	or used to own, operate, or utilize it, including		
	<i>dazardous material</i> means anything an enviro oxic substance, hazardous material, pollutant	onmental law defines as a hazardous waste, hazardous substance,	
· ·	oxic substance, nazardous material, polititam	t, Contaminant, or Similar term.	
port a	ıll notices, releases, and proceedings that you	u know about, regardless of when they occurred.	
Has	s any governmental unit notified you that	you may be liable or potentially liable under or in violation of an environmen	ntal law?
✓	No		
	Yes. Fill in the details.		
		Governmental unit Environmental law, if you kn	now it Date of
		Governmental unit Environmental law, if you kn	now it Date of notice
		Governmental unit Environmental law, if you kn	
	Name of site	Governmental unit Environmental law, if you kn	
		Governmental unit	
	Name of site Number Street		
		Governmental unit NumberStreet	
		Governmental unit	
		Governmental unit NumberStreet	
	Number Street	Governmental unit NumberStreet	
Hav	Number Street	Governmental unit NumberStreet City State Zip Code	
Hav	Number Street City State Zip Code ve you notified any governmental unit of a	Governmental unit NumberStreet City State Zip Code	
Hav	Number Street City State Zip Code ve you notified any governmental unit of a	Governmental unit NumberStreet City State Zip Code	
Hav	Number Street City State Zip Code ve you notified any governmental unit of a	Governmental unit NumberStreet City State Zip Code	
Hav	Number Street City State Zip Code ve you notified any governmental unit of a	Governmental unit NumberStreet City State Zip Code	notice
Hav	Number Street City State Zip Code ve you notified any governmental unit of a	Governmental unit NumberStreet City State Zip Code any release of hazardous material?	notice
Ha	Number Street City State Zip Code ve you notified any governmental unit of a	Governmental unit NumberStreet City State Zip Code any release of hazardous material?	notice
Hav	Number Street City State Zip Code ve you notified any governmental unit of a	Governmental unit NumberStreet City State Zip Code any release of hazardous material?	notice
. Ha∙	Number Street City State Zip Code ve you notified any governmental unit of a No Yes. Fill in the details.	Governmental unit NumberStreet City State Zip Code any release of hazardous material? Governmental unit Environmental law, if you kn	notice
Hav	Number Street City State Zip Code ve you notified any governmental unit of a No Yes. Fill in the details.	Governmental unit NumberStreet City State Zip Code any release of hazardous material? Governmental unit Environmental law, if you kn	notice
Ha·	Number Street City State Zip Code ve you notified any governmental unit of a No Yes. Fill in the details.	Governmental unit NumberStreet City State Zip Code any release of hazardous material? Governmental unit Environmental law, if you know the state of the st	notice
Ha·	Number Street City State Zip Code ve you notified any governmental unit of a No Yes. Fill in the details.	Governmental unit NumberStreet City State Zip Code any release of hazardous material? Governmental unit Environmental law, if you kn	notice
Hav	Number Street City State Zip Code ve you notified any governmental unit of a No Yes. Fill in the details.	Governmental unit NumberStreet City State Zip Code any release of hazardous material? Governmental unit Environmental law, if you know the state of the st	notice

Debtor 1			Α.	Johnson	Case n	umber (if known)	
	First Name		Middle Name	Last Name			
00 11-						Ha Olash da salih masaka sada ad	
26. Ha	ve you been a par	ty in any judic	iai or administ	rative proceeding und	er any environmenta	I law? Include settlements and ord	ers.
	No						
✓	!						
	Yes. Fill in the de	etails.					
				Court or agency		Nature of the case	Status of the
				oourt or agency		Nature of the case	case
	O +:+ -						Judo
	Case title						Pending
				Court Name			r ending
				oour ruino			On appeal
	Case number			NumberStreet			U On appear
	Case Humber						Concluded
				City State	Zin Codo		
				City State	Zip Code		
	Civa Dataila A	haut Vaum D)l.a.a.a		
Part 11:	Give Details A	bout Your B	susiness or C	onnections to Any E	susiness		
27. Wi	thin 4 years before	you filed for	bankruptcy, di	d you own a business o	or have any of the fol	lowing connections to any busines:	s?
	A sole propi	rietor or self-e	mployed in a tr	ade, profession, or oth	ner activity, either full-	time or part-time	
				•	-	•	
	☐ A member of	ו a ווmited liab	uity company (LLC) or limited liability p	partnersnip (LLP)		
	A partner in	a partnership)				
		-					
	An oπicer, d	lirector, or ma	ınagıng executi	ve of a corporation			
	An owner of	at least 5% o	of the voting or	equity securities of a co	orporation		
	_		3		•		
✓	No. None of the	above applies	s. Go to Part 12	2.			
					. 1		
	Yes. Check all tr	nat apply abov	ve and till in the	e details below for each	n business.		
				Describe the na	ture of the business	Employer Identification r	number Do not
						include Social Security n	
	Business Name			_		EIN:	
	Dusiness Name						
	Number Street					Dates business existed	
				Name of accour	ntant or bookkeeper		
	City	State	Zip Code			From To	
				Describe the na	ture of the business	Employer Identification r	number Do not
						include Social Security n	number or ITIN.
	Business Name			-		EIN:	
	שמווופסס ואמווופ						
						.	
	Number Street					Dates business existed	
				Name of accour	ntant or bookkeeper		
	City	State	Zip Code			From To	
	J,	0.0.0	0000			From To	
				Dogorika +ha	ature of the business	Employer Identification	number De ret
				Describe the na	iture of the business		
						include Social Security n	iuiliber of HIN.
						EIN:	
	Business Name						
	Number Street					Dates business existed	
				Name of accoun	ntant or bookkeeper		
	0.11	01-1-	7'- 0 '		o. 230kkoopei		
	City	State	Zip Code			From To	

Deb	tor 1 Lura		A.	Johnson	Case number (if known)
	First Nam)	Middle Name	Last Name	
28.	creditors, o	ers before you filed for other parties.	or bankruptcy, did yo	u give a financial statem	ent to anyone about your business? Include all financial institutions,
	✓ No				
	Yes. Fil	in the details below.			
				Date issued	
	Name			MM/DD/YYYY	-
	Numbe	r Street		_	
	-			_	
	City	State	Zip Code		
Part	t 12: Sign E	elow			
t	true and corr a bankruptcy	ect. I understand that case can result in fi	t making a false sta nes up to \$250,000,	tement, concealing prope	nents, and I declare under penalty of perjury that the answers are erty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	•	/s/ Lura Jonns			
		Signature of Debto	or i		Signature of Debtor 2
		Date 11/15/2019			Date
	Did vou attac	h additional pages to	Your Statement of	Financial Affairs for Indivi	duals Filing for Bankruptcy (Official Form 107)?
		ii aaaitioilai pagoo t	o rour otatomont or	i manorar / mano ror marvi	addio 1 milg 161 Daimtapto y (Omolai 1 omi 107)1
Ļ	✓ No				
L	Yes				
ı	Did you pay o	r agree to pay some	one who is not an at	orney to help you fill out	bankruptcy forms?
ſ	✓ No				
ľ	Yes. Nam	e of person			Attach the Bankruptcy Petition Preparer's Notice,
L					Declaration, and Signature (Official Form 119)

Fill in this	information to identify your c	ase:					
Debtor 1	Lura	A.		Johnson			
Debtor 2	First Name	Middle N	ame	Last Name			
(Spouse, if fil	First Name	Middle N	ame	Last Name			
United Sta	ites Bankruptcy Court for the:	Northern	D	istrict of Georgia			
Case num (If known)	ber			(State)			
Officia	l Form 106A/B						Check if this is an amended filing
Sched	dule A/B: Prope	erty					12/1
category v responsibl write your	tegory, separately list and o where you think it fits best. I e for supplying correct infor name and case number (if k Describe Each Residenc	Be as complete ar mation. If more sp known). Answer ev	nd accurate pace is need very question	as possible. If two married ded, attach a separate shee n.	people are t to this fo	e filing together, both a rm. On the top of any a	re equally
1. Do you	own or have any legal or ed	quitable interest i	n any reside	ence, building, land, or simil	ar propert	y?	
$\overline{\mathbf{A}}$	No. Go to Part 2						
1.1	Yes. Where is the property? Street address, if available, or	other description	Single-	e property? Check all that appifamily home or multi-unit building	oly.	the amount of any secu	claims or exemptions. Put red claims on <i>Schedule D:</i> ims <i>Secured by Property.</i>
			Condo Manufa	minium or cooperative		Current value of the entire property?	Current value of the portion you own?
	Number Street City State	Zip Code	Investn Timesh Other	nent property are		Describe the nature o interest (such as fee s the entireties, or a life	imple, tenancy by
			one. Debtor Debtor Debtor	2 only 1 and Debtor 2 only		Check if this is co (see instructions)	mmunity property
lf			Other info	one of the debtors and anoth rmation you wish to add abo lentification number:		m, such as local	
1.2	Street address, if available, or		Single-Duplex	e property? Check all that appliamily home or multi-unit building minium or cooperative	oly.	the amount of any secu Creditors Who Have Cla Current value of the	claims or exemptions. Put red claims on <i>Schedule D:</i> ims Secured by Property. Current value of the
			Manufa	actured or mobile home		entire property?	portion you own?
	Number Street City State	Zip Code	Land Investn Timesh Other	nent property are		Describe the nature o interest (such as fee s the entireties, or a life	imple, tenancy by
			one. Debtor Debtor Debtor At least Other info	•	er	(see instructions)	mmunity property

Official Form 106A/B Schedule A/B: Property page 1

ebtor 1	Lura	A.	Johnson Case nun	ber (if known)	
	First Name	Middle Name	Last Name		<u> </u>
_	mber Street / State	Tip Code	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number: at all of your entries from Part 1, including any entires	Describe the nature of your owner interest (such as fee simple, tend the entireties, or a life estate), if Check if this is community processed instructions) m, such as local	on Schedule D: If by Property. It by Pr
	l the dollar value of the nor			ries for pages	
		to that number			
	ave attached for Part 1. Wri	ite that number	nere.		
art 2: you own to Cars, value on No.	Describe Your Vehicles wn, lease, or have legal or that someone else drives. If y ans, trucks, tractors, sport util	S equitable intere ou lease a vehicle	st in any vehicles, whether they are registered on any of the contracts and the contracts and the contracts are registered on the contracts are registered on the contracts are registered on the contract of the contra	•	
you ha art 2: D you ow u own t Cars, va No V Ye	Describe Your Vehicles wn, lease, or have legal or of that someone else drives. If y ans, trucks, tractors, sport utions	S equitable intere ou lease a vehicle lity vehicles, moto	st in any vehicles, whether they are registered on each also report it on Schedule G: Executory Contracts a corcycles	nd Unexpired Leases.	vemotions. Put
art 2: you own to Cars, value on No.	Describe Your Vehicles wn, lease, or have legal or of that someone else drives. If y ans, trucks, tractors, sport utions	S equitable intere ou lease a vehicle	st in any vehicles, whether they are registered on any of the contracts and the contracts and the contracts are registered on the contracts are registered on the contracts are registered on the contract of the contra	Do not deduct secured claims or exthe amount of any secured claims and Creditors Who Have Claims Secure Current value of the entire property? \$0.00 \$0.00	on Schedule D: d by Property.

Debtor 1	Lura First Name	A. Middle Name	Johnson Last Name	Case numbe	r (if known)	
3.3	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the ine. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 of the debtor 1 only Check if this is communinstructions)	only ors and another	the amount of any sec	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. Current value of the portion you own?
3.4	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or		the amount of any sec	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. Current value of the portion you own?
	ercraft, aircraft, motor hon moles: Boats, trailers, motors	•	At least one of the debto Check if this is communinstructions)	ors and another unity property (see er vehicles, and acce		
4.1	Yes Make Model: Year: Approximate mileage: Other information:		Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 of At least one of the debtor Check if this is communinstructions)	only ors and another	the amount of any sec	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. Current value of the portion you own?
4.2	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 of the debtor th	only ors and another	the amount of any sec	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. Current value of the portion you own?
	the dollar value of the po ve attached for Part 2. Wr	•	-	• •		6900.00

Case 19-68451-lrc Doc 1 Filed 11/15/19 Entered 11/15/19 16:19:57 Desc Main Document Page 23 of 71

Debtor 1 Lura Johnson Case number (if known) First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Household Goods and Furnishings \$300.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Electronics \$100.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... Wearing Apparel \$150.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Nο Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No **✓** Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached

for Part 3. Write that number here

\$550.00

Case 19-68451-lrc Doc 1 Filed 11/15/19 Entered 11/15/19 16:19:57 Desc Main Document Page 24 of 71

Debtor 1 Lura Johnson Case number (if known) First Name Last Name **Describe Your Financial Assets** Part 4: Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: \$50.00 17.1. Checking account: Bank of America 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ◪ No Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

Deb	tor 1 L	Lura First Name	A. Middle Name	Johnson Last Name	Case number (if known)	
20.	Gove Nego Non-	ernment and corpo otiable instruments in negotiable instrume	orate bonds and other negotiable include personal checks, cashiers are those you cannot transfer	le and non-negotiable in checks, promissory notes	, and money orders.	
		No Yes. Give specific information about them	Issuer name:			
21.	Exam			thrift savings accounts, c	or other pension or profit-sharing plans	
		No Yes. List each	Type of account:	Institution name:		
	—	account	401(k) or similar plan:	TSP		\$25000.00
	,	separately.	Pension plan:			
			IRA:			
			Retirement account:			
			Keogh:			
			Additional account:			-
			Additional account:			
22.	Your Exam comp		prepayments deposits you have made so that y vith landlords, prepaid rent, public			
		Yes	Electric:			<u>. </u>
			Gas:			
			Heating oil:			
			Security deposit on rental unit:			
			Prepaid rent:			
			Telephone:			
			Water:			·
			Rented furniture:			·
			Other:			
23.	Annı	uities (A contract fo	r a periodic payment of money to	you, either for life or for a	number of years)	
	Ħ.	No Yes	Issuer name and description:			
						· -

Debt	or 1 Lura First Name	A. Middle Name	Johnson Last Name	Case number (if known)	
24.	Interests in an educ			under a qualified state tuition program.	,
	No Institu	ition name and description. Separa	ately file the records of any in	erests.11 U.S.C. § 521(c):	
25.	Trusts, equitable or exercisable for you	r future interests in property (ot r benefit	her than anything listed in	line 1), and rights or powers	
	No Yes. Describe				
26.	Examples: Internet de	s, trademarks, trade secrets, an omain names, websites, proceeds			
	Yes. Describe				
27.		es, and other general intangible permits, exclusive licenses, coopera		uor licenses, professional licenses	
	✓ No Yes. Describe				
Mor	ney or property ow	red to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to	you			
28.	✓ No				00.00
28.	No Yes. Give specific			Federal:	\$0.00
28.	No Yes. Give specific about them you already	information , including whether filed the returns		Federal: State:	\$0.00 \$0.00
	Yes. Give specific about them you already and the tax	information , including whether			·
	Yes. Give specific about them you already and the tax Family support Examples: Past due o	information , including whether filed the returns years	port, child support, maintena	State:	\$0.00 \$0.00
	No Yes. Give specific about them you already and the tax Family support Examples: Past due o	r information , including whether filed the returns years	port, child support, maintena	State: Local:	\$0.00 \$0.00
	Yes. Give specific about them you already and the tax Family support Examples: Past due o	r information , including whether filed the returns years	port, child support, maintena	State: Local: nce, divorce settlement, property settlement	\$0.00 \$0.00
	No Yes. Give specific about them you already and the tax Family support Examples: Past due o	r information , including whether filed the returns years	port, child support, maintena	State: Local: nce, divorce settlement, property settlement Alimony: Maintenance:	\$0.00 \$0.00 at \$0.00
	No Yes. Give specific about them you already and the tax Family support Examples: Past due o	r information , including whether filed the returns years	port, child support, maintena	State: Local: nce, divorce settlement, property settlement Alimony:	\$0.00 \$0.00 at \$0.00 \$0.00 \$0.00
	No Yes. Give specific about them you already and the tax Family support Examples: Past due o	r information , including whether filed the returns years	port, child support, maintena	State: Local: Alimony: Maintenance: Support: Divorce settlement:	\$0.00 \$0.00 at \$0.00 \$0.00 \$0.00 \$0.00
29.	Yes. Give specific about them you already and the tax Family support Examples: Past due o Yes. Give specific	e information , including whether filed the returns years r lump sum alimony, spousal sup e information		State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 at \$0.00 \$0.00 \$0.00
29.	Yes. Give specific about them you already and the tax Family support Examples: Past due o Yes. Give specific Other amounts some Examples: Unpaid wa	e information , including whether filed the returns years r lump sum alimony, spousal sup e information	s, disability benefits, sick pay,	State: Local: Alimony: Maintenance: Support: Divorce settlement:	\$0.00 \$0.00 at \$0.00 \$0.00 \$0.00 \$0.00
29.	Yes. Give specific about them you already and the tax Family support Examples: Past due o Yes. Give specific Other amounts some Examples: Unpaid wa	e information , including whether filed the returns years r lump sum alimony, spousal sup e information	s, disability benefits, sick pay,	State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 at \$0.00 \$0.00 \$0.00 \$0.00
29.	Yes. Give specific about them you already and the tax Family support Examples: Past due o Yes. Give specific Other amounts some Examples: Unpaid wa Social Sections	e information , including whether filed the returns years r lump sum alimony, spousal sup e information	s, disability benefits, sick pay,	State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 at \$0.00 \$0.00 \$0.00 \$0.00

Debt	tor 1 Lura	A.	Johnson	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insurance paramples: Health, disability		lth savings account (HSA); credit, ho	omeowner's, or renter's insurance	
	Yes. Name the insura of each policy and lis		Company name:	Beneficiary:	Surrender or refund value:
32.	Any interest in property If you are the beneficiary property because someon	of a living trust, expect p	someone who has died proceeds from a life insurance policy	, or are currently entitled to receive	
	No Yes. Describe				
33.			you have filed a lawsuit or made a rance claims, or rights to sue	ı demand for payment	
	No Yes. Describe				
34.	Other contingent and u	nliquidated claims of	every nature, including counterc	aims of the debtor and rights	
	No Yes. Describe				
35.	Any financial assets you	u did not already list			
	✓ No Yes. Describe				
36.		-	n Part 4, including any entries for		\$25050.00
Part	5: Describe Any Bus	siness-Related Pro	perty You Own or Have an In	terest In. List any real estate in Part	: 1.
37.	Do you own or have any	legal or equitable int	erest in any business-related pro	perty?	
	No. Go to Part 6. Yes. Go to line 38.			p D	Current value of the cortion you own? On not deduct secured claims or exemptions
38.	Accounts receivable or	commissions you alre	eady earned		
	No Yes. Describe				
39.	Office equipment, furni Examples: Business-relat		, modems, printers, copiers, fax mad	chines, rugs, telephones, desks, chairs, elect	ronic devices
	No Yes. Describe				

Deb	tor 1 Lura	A.	Johnson	Case number (if known)	
	First Name	Middle Name	Last Name		
40.	Machinery, fixtures, e	equipment, supplies you	use in business, and tools of y	our trade	
	✓ No				
	Yes. Describe				
	_				
41.	Inventory				
	✓ No				
	Yes. Describe				
	Tes. Describe				
12	Interests in partnersh	nine or joint ventures			
72.		iips or joint ventures			
	✓ No		Manager Constitution	0/ - (
	Yes. Give specific		Name of entity:	% of ownership:	
	information about				
	them				<u> </u>
					<u> </u>
10.4	Duatamas liata mailina	u liata au athau aamuilati		-	
43.	Justomer lists, mailing	lists, or other compilati	ions		
	✓ No				
	Yes. Do your lists i	include personally identifial	ole information (as defined in 11	U.S.C. § 101(41A))?	
	ш .				
	No				
	Yes. Desc	cribe			
	Ш				
44.	Any business-related	property you did not alro	eady list		
44.		property you did not alro	eady list		
44.	Any business-related No	property you did not alro	eady list		
44.	✓ No Yes. Give specific	property you did not alro	eady list		
44.	✓ No	property you did not alro	eady list		
44.	✓ No Yes. Give specific	property you did not alro	eady list		
44.	✓ No Yes. Give specific	property you did not alro	eady list		
44.	✓ No Yes. Give specific	property you did not alre	eady list		
44.	✓ No Yes. Give specific	property you did not alre	eady list		
44.	✓ No Yes. Give specific	property you did not alre	eady list		
44.	✓ No Yes. Give specific	property you did not alre	eady list		
44.	✓ No Yes. Give specific	property you did not alre	eady list		
	No Yes. Give specific information			r nages you have attached	
45. A	No Yes. Give specific information	all of your entries from P	art 5, including any entries for		
45. A	No Yes. Give specific information	all of your entries from P	art 5, including any entries for	r pages you have attached	
45. A for Pa	No Yes. Give specific information	all of your entries from P er here	art 5, including any entries for		
45. A	No Yes. Give specific information dd the dollar value of a art 5. Write that numbers	all of your entries from P er here	art 5, including any entries for		
45. A for Pa ▶ Part	No Yes. Give specific information dd the dollar value of a art 5. Write that number of the specific information of the specific information i	all of your entries from P er here	art 5, including any entries for	y You Own or Have an Interest In.	
45. A for Pa	No Yes. Give specific information dd the dollar value of a art 5. Write that number of the specific information of the specific information i	all of your entries from P er here	art 5, including any entries for	y You Own or Have an Interest In.	
45. A for Pa ▶ Part	No Yes. Give specific information dd the dollar value of a art 5. Write that number of the specific information of the specific information i	all of your entries from P er here	art 5, including any entries for	y You Own or Have an Interest In.	Current value of the
45. A for Pa ▶ Part	No Yes. Give specific information dd the dollar value of a art 5. Write that number of you own or have are to you own or have a will not only on the control of th	all of your entries from Per herearm-and Commercian interest in farmland, list it in any legal or equitable int	art 5, including any entries for	y You Own or Have an Interest In.	Current value of the portion you own?
45. A for Pa ▶ Part	Yes. Give specific information dd the dollar value of a art 5. Write that number of you own or have are the control of the control o	all of your entries from Per herearm-and Commercian interest in farmland, list it in any legal or equitable int	art 5, including any entries for	y You Own or Have an Interest In.	Current value of the
45. A for Pa	No Yes. Give specific information dd the dollar value of a art 5. Write that number of you own or have are to you own or have a will not only on the control of th	all of your entries from Per herearm-and Commercian interest in farmland, list it in any legal or equitable int	art 5, including any entries for	y You Own or Have an Interest In.	Current value of the portion you own? Do not deduct secured claims
45. A for Pa	No Yes. Give specific information dd the dollar value of a art 5. Write that number of you own or have are the compact of the compac	all of your entries from Per here	art 5, including any entries for	y You Own or Have an Interest In.	Current value of the portion you own? Do not deduct secured claims
45. A for Pa	No Yes. Give specific information dd the dollar value of a lart 5. Write that number of you own or have are larger of you own or have are larger of you. On the larger of you own or have are larger of yes. Go to line 47. Farm animals Examples: Livestock, page 1.	all of your entries from Per here	art 5, including any entries for	y You Own or Have an Interest In.	Current value of the portion you own? Do not deduct secured claims
45. A for Pa	No Yes. Give specific information dd the dollar value of a art 5. Write that number of you own or have are pooled you own or have are pooled you own or have are pooled you. Yes. Go to line 47. Farm animals Examples: Livestock, pooled you have are pooled you.	all of your entries from Per here	art 5, including any entries for	y You Own or Have an Interest In.	Current value of the portion you own? Do not deduct secured claims
45. A for Pa	Yes. Give specific information dd the dollar value of a art 5. Write that number of you own or have are pooled you own or have are pooled you. Yes. Go to line 47. Farm animals Examples: Livestock, pooled yes.	all of your entries from Per here	art 5, including any entries for	y You Own or Have an Interest In.	Current value of the portion you own? Do not deduct secured claims
45. A for Pa	No Yes. Give specific information dd the dollar value of a art 5. Write that number of you own or have are pooled you own or have are pooled you own or have are pooled you. Yes. Go to line 47. Farm animals Examples: Livestock, pooled you have are pooled you.	all of your entries from Per here	art 5, including any entries for	y You Own or Have an Interest In.	Current value of the portion you own? Do not deduct secured claims

Debt		Lura First Name		ohnson ast Name	Case number (if known)	
48.	Cro	ps-either growing o	or harvested			
	V	No				
		Yes. Describe				
		L				
49.	Far	m and fishing equip	ment, implements, machinery, fixture	s, and tools of trade		
		No				
	Ш	Yes. Describe				
50	Eor	m and fishing suppl	ies, chemicals, and feed			
30.	rai	No	ies, chemicais, and leed			
	M	Yes. Describe				
51.	Any	farm- and commer	cial fishing-related property you did n	ot already list		
	✓	No				
		Yes. Describe				
		L			_	
			l of your entries from Part 6, including			
for Pa	art 6.	. Write that number	here			
		Danasilaa All Daas		atio That Var Did Na	t I tot Alexand	
Part 53.			perty You Own or Have an Intere perty of any kind you did not already li		t List Above	
			s, country club membership			
	✓	No				<u> </u>
		Yes. Give specific information				
54. A	dd th	ne dollar value of all	of your entries from Part 7. Write tha	t number here		<u> </u>
Part	8:	List the Totals of	Each Part of this Form			
55. F	Part	1: Total real estate,	, line 2		>	
		2 total vehicles, line		\$16900.00		
		•	d household items, line 15	\$550.00		
		l: Total financial as:		\$25050.00		
			elated property, line 45			
			ishing-related property, line 52			
			erty not listed, line 54			
62.1	Total	personal property.	Add lines 56 through 61	\$42500.00	Copy personal property total	+ \$42500.00
					Sopy policinal property total P	# 40500.05
63. T	otal	of all property on So	chedule A/B. Add line 55 + line 62			\$42500.00

Case 19-68451-lrc Doc 1 Filed 11/15/19 Entered 11/15/19 16:19:57 Desc Main Document Page 30 of 71

Debtor 1	Lura	A.	Johnson
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States I	Bankruptcy Court for the:	Northern	District of Georgia
			(State)
Case number			
(If known)	•		

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pai	t 1: Identify the Property You Claim	n as Exempt					
1.	You are claiming state and federal n You are claiming federal exemptions	as are you claiming? Check one only, even if your spouse is filing with you. Tate and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) Ederal exemptions. 11 U.S.C. § 522(b)(2) St on Schedule A/B that you claim as exempt, fill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption			
	Brief description: Household Goods and Furnishings Line from Schedule A/B: 06	\$300.00	\$300.00 100% of fair market value, up to any applicable statutory limit	O.C.G.A. § 44-13-100(a)(4)			
	Brief description: Wearing Apparel Line from Schedule A/B: 11	\$150.00	\$150.00 100% of fair market value, up to any applicable statutory limit	O.C.G.A. § 44-13-100(a)(4)			
3.	✓ No	ry 3 years after that for o	375? cases filed on or after the date of adjustment.) ithin 1,215 days before you filed this case?				

Case 19-68451-lrc Doc 1 Filed 11/15/19 Entered 11/15/19 16:19:57 Desc Main Document Page 31 of 71

Debtor 1 Lura Johnson Case number (if known) First Name Middle Name Last Name **Additional Page** Part 2: Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B Brief O.C.G.A. § 44-13-100(a)(4) \$100.00 description: \checkmark \$100.00 **Electronics** 100% of fair market value, up to any I ine from applicable statutory limit Schedule A/B: 07 Brief O.C.G.A. § 44-13-100(a)(6) \$50.00 description: **✓** \$50.00 Checking account, Bank 100% of fair market value, up to any of America applicable statutory limit Line from Schedule A/B: O.C.G.A. § 44-13-100(a)(2.1) \$25,000.00 description: $\overline{}$ \$25,000.00 401(k) or similar plan, 100% of fair market value, up to any **TSP** applicable statutory limit Line from Schedule A/B: Brief O.C.G.A. § 44-13-100(a)(3) \$16,900.00 description: $\overline{}$ \$0 Mitsubishi Outlander,

100% of fair market value, up to any

applicable statutory limit

2018, 2018 Mitsubishi

03

Outlander

Line from Schedule A/B:

Fill in	this information to identify your car	se:				
Debto	or 1 Lura	A.	Johnson			
20010	First Name	Middle Name	Last Name			
Debto		Maralalla Massa	Leal News			
	T not reallo	Middle Name	Last Name			
Unite	d States Bankruptcy Court for the:	Northern	District of Georgia (State)			
Case (If knov	number vn)					
Off	icial Form 106D			!		Check if this is a amended filing
Scl	hedule D: Credito	ors Who Hav	ve Claims Secure	ed by Prop	ertv	12/1
Be as more	complete and accurate as possib space is needed, copy the Additio and case number (if known).	le. If two married people	are filing together, both are equa	ally responsible for s	upplying correct info	rmation. If
1. I	Do any creditors have claims se	ecured by your propert	y?			
	No. Check this box and subm	nit this form to the court v	vith your other schedules. You hav	e nothing else to rep	ort on this form.	
i	Yes. Fill in all of the information	n below.				
Part	1: List All Secured Claims					
2.	List all secured claims. If a credit	or has more than one sec	ured claim, list the creditor	Column A	Column B	Column C
	separately for each claim. If more the in Part 2. As much as possible, list name.	•		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	Santander Consumer USA	Describe the property	that secures the claim:	\$33,211.49	\$0.00	\$33,211.49
_	Creditor's Name PO Box 961245	2015 Nissan Altima	mat secures the claim.			
	Number Street		the claim is: Check all that apply.			
		Contingent				
	Fort Worth TX 76161	Unliquidated				
	City State ZIP Code Who owes the debt? Check one.	Disputed				
	✓ Debtor 1 only	Nature of lien. Check a	ll that apply.			
	Debtor 2 only		nade (such as mortgage or secured			
	Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates	car loan) Statutory lien (such	as tax lien, mechanic's lien)			
		Judgment lien from	,			
		Other (including a rig				
	to a community debt Date debt was incurred	Last 4 digits of accour	nt number			
2.2	Prestige Financial Service Inc Creditor's Name	Describe the property	that secures the claim:	\$17,842.00	\$16,900.00	\$942.00
	1420 South 500 West	2018 Mitsubishi Outlan				
	Number Street	Contingent	the claim is: Check all that apply.			
	Calt Lake City LIT 04445	Unliquidated				
	Salt Lake City UT 84115 City State ZIP Code	Disputed				
	Who owes the debt? Check one.	Nature of lien. Check a	II that apply			
	✓ Debtor 1 only Debtor 2 only		nade (such as mortgage or secured			
	Debtor 1 and Debtor 2 only	car loan)	made (such as mortgage or secured			
	At least one of the debtors	Statutory lien (such	as tax lien, mechanic's lien)			
	and another	Judgment lien from	a lawsuit			
	Check if this claim relates to a community debt Date debt was 10/2019	Other (including a rig	·			
	incurred	Last 4 digits of accour		1		
	Add the dollar value of y here:	our entries in Column A	on this page. Write that number	\$51,053.49		

Case number ((f known)) Official F Schedu Be as complete other party to a Form 106A/B) a claims that are the entries in t known). Part 1: List 1. Do any complete of the party to a Form 106A/B.	e and accurate as possi any executory contracts and on Schedule G: Exe e listed in Schedule D: C the boxes on the left. Att All of Your PRIORITY reditors have priority un Go to Part 2.	ble. Use Part 1 for cree s or unexpired leases the cutory Contracts and the reditors Who Hold Clai tach the Continuation		with NONPRIC cts on Schedu e any creditor by the Part yo	DRITY claims vile A/B: Prop s with partia u need, fill i	perty (Official ally secured t out, number
(Spouse, if filing) United States E Case number (If known) Official F Schedu Be as complete other party to a Form 106A/B) a claims that are the entries in the known). Part 1: List 1. Do any complete other party to a Form 106A/B.	First Name Bankruptcy Court for the: Orm 106E/F LIE E/F: Cre e and accurate as possil any executory contracts and on Schedule G: Exert is listed in Schedule D: Court in Englished in En	Middle Name Northem Aditors Who ble. Use Part 1 for cree or unexpired leases the cutory Contracts and the cutory Contra	Last Name District of Georgia (State)	with NONPRIC cts on Schedu e any creditor by the Part yo	DRITY claims vile A/B: Prop s with partia u need, fill i	12/19 s. List the perty (Official lily secured t out, number
(Spouse, if filing) United States E Case number (If known) Official F Schedu Be as complete other party to a Form 106A/B) a claims that are the entries in the known). Part 1: List 1. Do any complete other party to a Form 106A/B.	Gorm 106E/F LIC E/F: Cre e and accurate as possil any executory contracts and on Schedule G: Executive bised in Schedule D: Cathe boxes on the left. Att All of Your PRIORITY reditors have priority un Go to Part 2.	Northern Aditors Who ble. Use Part 1 for cree for unexpired leases the cutory Contracts and the creditors Who Hold Clai tach the Continuation (Unsecured Claims	District of Georgia (State) District of Geor	with NONPRIC cts on Schedu e any creditor by the Part yo	DRITY claims vile A/B: Prop s with partia u need, fill i	12/19 s. List the perty (Official lilly secured t out, number
Case number ((f known)) Official F Schedu Be as complete other party to a Form 106A/B) a claims that are the entries in t known). Part 1: List 1. Do any complete of the party to a Form 106A/B.	orm 106E/F ule E/F: Cre e and accurate as possil any executory contracts and on Schedule G: Execute e listed in Schedule D: Ce the boxes on the left. Att All of Your PRIORITY reditors have priority un Go to Part 2.	ble. Use Part 1 for crees or unexpired leases the creditory Contracts and Use treditors Who Hold Claims of Unsecured Claims	O Have Unsecured Claims ditors with PRIORITY claims and Part 2 for creditors what could result in a claim. Also list executory contract. Unexpired Leases (Official Form 106G). Do not include ims Secured by Property. If more space is needed, coppage to this page. On the top of any additional pages	with NONPRIC cts on Schedu e any creditor by the Part yo	DRITY claims vile A/B: Prop s with partia u need, fill i	12/19 s. List the perty (Official lilly secured t out, number
Official F Schedu Be as complete other party to a Form 106A/B) a claims that are the entries in the known). Part 1: List 1. Do any complete other party to a serve of the party to a serve other party to	e and accurate as possil any executory contracts and on Schedule G: Exercial listed in Schedule D: Cithe boxes on the left. Att All of Your PRIORITY reditors have priority un Go to Part 2.	ble. Use Part 1 for cree s or unexpired leases the cutory Contracts and the reditors Who Hold Clai tach the Continuation	D Have Unsecured Claims ditors with PRIORITY claims and Part 2 for creditors what could result in a claim. Also list executory contract drexpired Leases (Official Form 106G). Do not include tims Secured by Property. If more space is needed, coppage to this page. On the top of any additional pages	with NONPRIC cts on Schedu e any creditor by the Part yo	DRITY claims vile A/B: Prop s with partia u need, fill i	12/19 s. List the perty (Official lilly secured t out, number
Be as complete other party to a Form 106A/B) a claims that are the entries in the known). Part 1: List 1. Do any complete of the complete of	e and accurate as possil any executory contracts and on Schedule G: Exercial listed in Schedule D: Cithe boxes on the left. Att All of Your PRIORITY reditors have priority un Go to Part 2.	ble. Use Part 1 for cree s or unexpired leases the cutory Contracts and the reditors Who Hold Clai tach the Continuation	ditors with PRIORITY claims and Part 2 for creditors what could result in a claim. Also list executory contractions of the country of the cou	with NONPRIC cts on Schedu e any creditor by the Part yo	DRITY claims vile A/B: Prop s with partia u need, fill i	12/19 s. List the perty (Official lilly secured t out, number
Be as completed to their party to a Form 106A/B) a claims that are the entries in the thicknown). Part 1: List 1. Do any complete the part 1: No. (e and accurate as possi any executory contracts and on Schedule G: Exe e listed in Schedule D: C the boxes on the left. Att All of Your PRIORITY reditors have priority un Go to Part 2.	ble. Use Part 1 for cree s or unexpired leases the cutory Contracts and the reditors Who Hold Clai tach the Continuation	ditors with PRIORITY claims and Part 2 for creditors what could result in a claim. Also list executory contractions of the country of the cou	with NONPRIC cts on Schedu e any creditor by the Part yo	lle A/B: Prop s with partia u need, fill i	s. List the perty (Official ally secured t out, number
Be as completed to their party to a Form 106A/B) a claims that are the entries in the thicknown). Part 1: List 1. Do any complete the part 1: No. (e and accurate as possi any executory contracts and on Schedule G: Exe e listed in Schedule D: C the boxes on the left. Att All of Your PRIORITY reditors have priority un Go to Part 2.	ble. Use Part 1 for cree s or unexpired leases the cutory Contracts and the reditors Who Hold Clai tach the Continuation	ditors with PRIORITY claims and Part 2 for creditors what could result in a claim. Also list executory contractions of the country of the cou	with NONPRIC cts on Schedu e any creditor by the Part yo	lle A/B: Prop s with partia u need, fill i	perty (Official ally secured t out, number
	f your priority unsecured					
✓ Yes.						
listed, ide As much Continuat	as possible, list the claims tion Page of Part 1. If more	s. If a claim has both pri in alphabetical order acc e than one creditor holds	s more than one priority unsecured claim, list the creditor's ority and nonpriority amounts, list that claim here and sho cording to the creditor's name. If you have more than two is a particular claim, list the other creditors in Part 3.	w both priority	and nonprio	rity amounts.
,	,	,	,	Total	Priority	Nonpriority
2.1 Georgia	Department of Revenue			claim \$0.00	amount \$0.00	\$0.00
Priority (1800 Ce Number Atlanta City	Creditor's Name entury Blvd Ne Ste 17200 Street Georgia State Sturred the debt? Check of	30345 Zip Code	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated			
	otor 1 only	nie.	Disputed			
Deb	otor 2 only		Type of PRIORITY unsecured claim:			
Deb	otor 1 and Debtor 2 only		Domestic support obligations Taxes and certain other debts you owe the			
At le	east one of the debtors an	d another	government			
Che	eck if this claim relates	to a community debt	Claims for death or personal injury while you were intoxicated			
Is the c ✓ No ✓ Yes	laim subject to offset?		Other. Specify			
	Revenue Service		Last 4 digits of account number	\$9,713.87	\$0.00	\$9,713.87
Priority (PO Box	Creditor's Name 7346		When was the debt incurred? n/a			
Number			As of the date you file, the claim is: Check all that apply.			
Deb	phia Pennsylvar State Curred the debt? Check of other 1 only ofter 2 only ofter 1 and Debter 2 only east one of the debters and eck if this claim relates a laim subject to offset?	Zip Code one. d another	Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations ✓ Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify			

Case 19-68451-lrc Doc 1 Filed 11/15/19 Entered 11/15/19 16:19:57 Desc Main Document Page 34 of 71

Debtor 1 Lura Johnson Case number (if known) First Name Last Name List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation 4.1 Access One \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a PO Box 410806 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated North Carolina 28241 Charlotte Disputed City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Other Is the claim subject to offset? No Yes Alliance Capital Management \$1,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1 North Lexington Ave Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated New York 10601 White Plains Disputed City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only $\overline{}$ Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify Consumer Debt Is the claim subject to offset? **✓** No Yes Atlanta Heart Specialist \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2665 North Decatur Road n/a Number As of the date you file, the claim is: Check all that apply. Suite 320 Contingent Unliquidated 30033 Decatur Georgia City Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: $\overline{\mathbf{A}}$ Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? Official Yes 106E/F Schedule E/F: Creditors Who Have Unsecured Claims page 2

Debtor 1 Lura A. Johnson Case number (if known)
First Name Middle Name Last Name

Part 2	Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page					
	After listing any entries on this page, number them beginning with	th 4.5, followed by 4.6, and so forth.	Total claim			
4.4	CAPITAL ONE BANK USA N.A.	Last 4 digits of account number	\$3,036.00			
	Nonpriority Creditor's Name P. O Box 30281	When was the debt incurred? n/a				
	Number Street	As of the date you file, the claim is: Check all that apply.				
		Contingent				
	Salt Lake City Utah 84130	Unliquidated				
	City State Zip Code	Disputed				
	Who incurred the debt? Check one. Debtor 1 only	Type of NONPRIORITY unsecured claim:				
	Debtor 1 only	Student loans				
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts				
	Check if this claim relates to a community debt	Other. Specify Credit Card				
	Is the claim subject to offset?	_				
	✓ No					
	Yes					
4.5	Comcast Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00			
	PO Box 301	When was the debt incurred?n/a				
	Number Street	As of the date you file, the claim is: Check all that apply.				
		Contingent				
	Southeastern Pennsylvania 19398	Unliquidated				
	City State Zip Code	Disputed				
	Who incurred the debt? Check one. Debtor 1 only	Type of NONPRIORITY unsecured claim:				
	Debtor 2 only	Student loans				
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar				
	Check if this claim relates to a community debt	debts Other. Specify Other				
	Is the claim subject to offset?	<u> </u>				
	✓ No					
	Yes					
4.6	Eastside heart and vascular LLC	Last 4 digits of account number	\$0.00			
	Nonpriority Creditor's Name PO Box 668	When was the debt incurred?				
	Number Street	·				
		As of the date you file, the claim is: Check all that apply. Contingent				
		Unliquidated				
	Brentwood Tennessee 37024 City State Zip Code	Disputed				
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:				
	Debtor 1 only	Student loans				
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or				
	<u> </u>	divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar				
	At least one of the debtors and another	debts				
	Check if this claim relates to a community debt	Other. Specify Other				
	Is the claim subject to offset? No					
	Yes					
	100					

Debtor 1 Lura A. Johnson Case number (if known)
First Name Middle Name Last Name

Part 2	Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page					
	After listing any entries on this page, number them beginning with	th 4.5, followed by 4.6, and so forth.	Total claim			
4.7	First Investors Financial Service Inc	- Last 4 digits of account number	\$20,744.00			
	Nonpriority Creditor's Name 380 Interstate North Parkway	When was the debt incurred? n/a				
	Number Street	As of the date you file, the claim is: Check all that apply.				
	3rd Floor	Contingent				
	Atlanta Georgia 30339	Unliquidated				
	Atlanta Georgia 30339 City State Zip Code	Disputed				
	Who incurred the debt? Check one. Debtor 1 only	Type of NONPRIORITY unsecured claim:				
	<u> </u>	Student loans				
	Debtor 2 only	Obligations arising out of a separation agreement or				
	Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims				
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts				
	Check if this claim relates to a community debt	Other. Specify Consumer Debt				
	Is the claim subject to offset? No					
	Yes					
4.8	Gwinnett Medical Center Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00			
	PO Box 116228	When was the debt incurred?n/a				
	Number Street	As of the date you file, the claim is: Check all that apply.				
		Contingent				
	Atlanta Georgia 30368	Unliquidated				
	City State Zip Code	Disputed				
	Who incurred the debt? Check one. Debtor 1 only	Type of NONPRIORITY unsecured claim:				
	Debtor 2 only	Student loans				
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar				
	Check if this claim relates to a community debt	debts				
	Is the claim subject to offset?	✓ Other. Specify Medical				
	✓ No					
	Yes					
4.9	Medicredit	Look 4 digito of account number	\$0.00			
	Nonpriority Creditor's Name	Last 4 digits of account number When was the debt incurred? n/a				
	Three City Place Drive Number Street	· ———				
	Ste 690	As of the date you file, the claim is: Check all that apply. Contingent				
		Unliquidated				
	Saint Louis Missouri 63141 City State Zip Code	Disputed				
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:				
	Debtor 1 only	Student loans				
	Debtor 2 only	Obligations arising out of a separation agreement or				
	Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims				
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts				
	Check if this claim relates to a community debt	Other. Specify Other				
	Is the claim subject to offset?					
	✓ No					
	Yes					

Case 19-68451-lrc Doc 1 Filed 11/15/19 Entered 11/15/19 16:19:57 Desc Main Document Page 37 of 71

Debtor 1 Lura Johnson Case number (if known) First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 Progressive Leasing \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 256 West Data Drive Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 84020 Utah Draper City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Other Is the claim subject to offset? No ◪ Yes Quantum3 Group LLC \$657.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a PO Box 788 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Kirkland Washington 98083 Disputed City Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Consumer Debt Is the claim subject to offset? **✓** No Yes WORLD FINANCE CORPORAT 4.12 \$733.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2640B METROPOLITAN PKWY 1/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent **ATLANTA** 30315 Georgia Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another

✓ No Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

Other. Specify

Debts to pension or profit-sharing plans, and other similar

011 InstallmentLoan

Case 19-68451-lrc Doc 1 Filed 11/15/19 Entered 11/15/19 16:19:57 Desc Main Document Page 38 of 71

Debtor 1 Lura A. Johnson Case number (if known)
First Name Middle Name Last Name

Office of Attorne	ev General				
Name	sy derioral		On which en	try in Part 1 or Pa	rt 2 did you list the original creditor?
40 Capitol Sq S	W		Line 2.1	of (Check	Part 1: Creditors with Priority Unsecured Claims
Number Stre	eet		_	one):	Part 2: Creditors with Nonpriority Unsecured Claims
Atlanta	Georgia	30334	Last 4 digits	of account number	er
City	State	Zip Code			
nternal Revenu	e Service - Atl		On which en	try in Part 1 or Pa	rt 2 did you list the original creditor?
lame			On which em	ily ili Fait i Oi Fa	it 2 did you list the original creditor:
	e St. NW, Stop 334-D	1	Line 2.2	of (Check	Part 1: Creditors with Priority Unsecured Claims
Number Stre	eet			one):	Part 2: Creditors with Nonpriority Unsecured Claims
Atlanta	Georgia	30308	Last 4 digits	of account number	er
City	State	Zip Code			
Special Assistan	t US Attorney		On which on	try in Part 1 or Pa	rt 2 did you list the original creditor?
Name			On which en	iry iii Part T Or Pa	rt 2 did you list the original creditor:
401 W. Peachtre			Line 2.2	of (Check	Part 1: Creditors with Priority Unsecured Claims
Number Stre	eet		<u></u>	one):	Part 2: Creditors with Nonpriority Unsecured Claims
Atlanta	Georgia	30308	Last 4 digits	of account numbe	er
City	State	Zip Code			
United States At Name	torney's Office		On which en	try in Part 1 or Pa	rt 2 did you list the original creditor?
75 Spring Street	t, S.W., Suite 600, U.S	S. Courthouse	Line 2.2	of (Check	✓ Part 1: Creditors with Priority Unsecured Claims
Number Stre	eet		<u></u>	one):	Part 2: Creditors with Nonpriority Unsecured Claims
Atlanta	Georgia	30303	Last 4 digits	of account numbe	er
City	State	Zip Code			·
	Justice, Tax Division			tru in Bort 4 or D-	et 2 did you list the original are ditar?
Name			On which en	uy in Part 1 or Pa	rt 2 did you list the original creditor?
75 Ted Turner [Line 2.2	of (Check	Part 1: Creditors with Priority Unsecured Claims
Number Stre	eet			one):	Part 2: Creditors with Nonpriority Unsecured Claims
Atlanta	Georgia	30303	Last 4 digits	of account numbe	er
City	State	Zip Code			
	s Management, LLC			turin Double and	
Name			On which en	ry in Part 1 or Pa	rt 2 did you list the original creditor?
Po Box 41067			Line 4.7	of (Check	Part 1: Creditors with Priority Unsecured Claims
Number Stre	eet			one):	Part 2: Creditors with Nonpriority Unsecured Claims
Norfolk	Virginia	23541	l ast 4 dinite	of account numbe	
	State	Zip Code	— ⊑aət + uiyitə	or account munible	~1

Case 19-68451-lrc Doc 1 Filed 11/15/19 Entered 11/15/19 16:19:57 Desc Main Document Page 39 of 71

Debtor 1 Lura A. Johnson Case number (if known)
First Name Middle Name Last Name

Part 4: Add th	ne Amounts for Each Type of Unsecured Claim		
	mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim.	for s	tatistical reporting purposes
			Total claims
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$0.00
	6b. Taxes and certain other debts you owe the government		\$9,713.87
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$9,713.87
			Total claims
Total claims from Part 2	6f. Student loans	6f.	\$0.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$26,170.00
	6j. Total. Add lines 6f through 6i.	6j.	\$26,170.00

Case 19-68451-lrc Doc 1 Filed 11/15/19 Entered 11/15/19 16:19:57 Desc Main Document Page 40 of 71

Fill in this information to identify your case:					
Debtor 1	Lura	A.	Johnson		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		Northern	District of Georgia		
			(State)		
Case number					
(If known)					

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

			3	
Fill in this infor	mation to identify your c	ase:		
Debtor 1	Lura	A.	Johnson	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	E:N	A4: 1 II A1		
(Spouse, It liling)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Georgia	
Case number			(State)	
(If known)				
				Check if this is an amended filing
Official	Form 106U			amended ming
Official	Form 106H			
Schedul	e H: Your Cod	lebtors		12/15
1. Do you ha No Yes 2. Within the ldaho, Lor No. Yes.	e last 8 years, have you uisiana, Nevada, New Mex Go to line 3. Did your spouse, forme No Yes. In which communit	lived in a community proico, Puerto Rico, Texas, Wirspouse, or legal equivary state or territory did yo	ashington, and Wisconsin.) alent live with you at the time	ommunity property states and territories include Arizona, California,
	Name of your spouse, f	ormer spouse, or legal equ	uivalent	
	Number Street			_
	City	State	Zip Code	_
		-		our spouse is filing with you. List the person shown in line 2 we listed the creditor on Schedule D (Official Form 106D),

Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

Official Form 106H Schedule H: Your Codebtors page 1

		D01	cument	1 age 42	01 7 1		
Fill in this inforn	nation to identify	your case:					
Debtor 1 Lu	ıra	A.	Johnso	n			
	rst Name	Middle Name	Last Na		— Che	eck if this is:	
Debtor 2		ACT III AT				An amended filing	
(Spouse, if filing) Fire	rst Name	Middle Name	Last Na	ame		<u> </u>	notition obsertor
United States Bar the: Case number	nkruptcy Court for	Northern	_ District of Ge (St	eorgia ate)		A supplement showing post- expenses as of the following	
(If known)					_	MM / DD / YYYY	
Official Fo	orm 106l						
Schedule	I: Your In	come					12/1
spouse. If more number (if know		, attach a separate she y question.				not include information a ional pages, write your n	
Fill in your en information.	nployment		Debtor 1			Debtor 2	
		Employment status	✓ Employ	ved		Employed	
attach a separa	ore than one job, ate page with		Not Em			Not Employed	
information about additional employers.		Occupation	Clerk			_	
	ne, seasonal, or	Employer's name		Deetel Carrie			
self-employed		-	Officed State	es Postal Service			
Occupation mor homemaker	ay include student r, if it applies.	Employer's address	2591 Buss Number Stre	Number Street		Number Street	
			Elk Grove	Illinois	60007		
			Village			City State	Zip Code
		How long employed	City	State	Zip Code		
		there?	30 years 10) months			
Part 2: Give I	Details About M	onthly Income					
Estimate montl	hlv income as of t	he date vou file this forn	n. If vou have r	nothina to repo	rt for any line. v	write \$0 in the space. Include	vour non-filing
spouse unless yo		•	•		•		
	ou are separateu.						low If you need
		e more than one employer, et to this form.	combine the in			·	iow. II you lieed
	n-filing spouse have		combine the in		all employers fo	For Debtor 2 or non-filing spouse	iow. II you need
more space, atta	n-filing spouse have ach a separate she y gross wages, sala		re all payroll			For Debtor 2 or	low. II you need
2. List monthly deductions.) be.	n-filing spouse have ach a separate she y gross wages, sala	et to this form. ery, and commissions (before a calculate what the monthly	re all payroll	For [Debtor 1	For Debtor 2 or	low. II you need

Debtor 1Lura First Name		Johnson _ast Name	Case numbe	r <i>(if</i>	
T iist Name	Middle Name	Last Name	known) For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here		→ 4.	\$5,205.85		
5. List all payroll deduct			·		
	nd Social Security deductions	5a.	\$1,048.49		
5b. Mandatory contri	butions for retirement plans	5b.	\$276.25		
5c. Voluntary contrib	utions for retirement plans	5c.	\$0.00		
-	ents of retirement fund loans	5d.	\$0.00		
5e. Insurance		5e.	\$387.51		
5f. Domestic support	obligations	5f.	\$0.00		
5g. Union dues	-	5g.	\$65.85		
	Specify:	_	\$0.00 +	· ·	
	etions. Add lines 5a + 5b + 5c + 5d + 5e +5f	-	\$1,778.10		
7. Calculate total month	nly take-home pay. Subtract line 6 from line	4. 7.	\$3,427.75		
8. List all other income	regularly received:				
business, professi	•				
	for each property and business showing inary and necessary business expenses, and				
the total monthly n		8a.	\$0.00		
8b. Interest and divid	lends	8b.	\$0.00		
8c. Family support pa dependent regula	nyments that you, a non-filing spouse, or a larly receive	a			
	pousal support, child support, maintenance, and property settlement.	8c.	\$0.00		
8d. Unemployment co	ompensation	8d.	\$0.00		
8e. Social Security		8e.	\$0.00		
Include cash assista cash assistance tha	t assistance that you regularly receive ance and the value (if known) of any non- it you receive, such as food stamps (benefits ental Nutrition Assistance Program) or	8f.	\$0.00		
8g. Pension or retire	ment income	8g.	\$0.00		
J		· ·	\$0.00 +		
	come. Specify:				
9. Add all other income	Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g +	- 611. 9.	\$0.00		
10. Calculate monthly in Add the entries in line	come. Add line 7 + line 9. 10 for Debtor 1 and Debtor 2 or non-filing sp	10. Douse	\$3,427.75	-	= \$3,427.75
Include contributions f friends or relatives.	ar contributions to the expenses that you rom an unmarried partner, members of your ounts already included in lines 2-10 or amounts	household, your	dependents, your roomr	,	
Specify:					11. + \$0.00
12. Add the amount in the Write that amount on t	12. \$3,427.75				
	•	•			Combined monthly income
13. Do you expect an inc No. Yes. Explain:	crease or decrease within the year after y	you file this form	?		monthly modifie

		Do	cument Page 44 o	f 71	
Fill in this inform	nation to identify your	case:			
Debtor 1	Lura First Name	A. Middle Name	Johnson Last Name		
Debtor 2				Check if this is:	
(Spouse, if filing)	First Name	Middle Name	Last Name	An amended filing	
	ankruptcy Court for the	: Northern	District of Georgia (State)	A supplement show expenses as of the	ving post-petition chapter 13 following date:
Case number (If known)				MM / DD / YYYY	_
	Form 106J • J: Your E x	penses		_	12/15
information. If i		, attach another sheet to t	e are filing together, both are e his form. On the top of any add		_
1. Is this a join					
No. Go	to line 2				
	oes Debtor 2 live in a	separate household?			
	7 No				
<u>_</u>	_	Ella Official Farman 100 L O. Fr	on an ana fau Camanata Hawada ald at	f Dahtar O	
0 D a b a			penses for Separate Household of	Depitor 2.	
_		No			
Do not list D Debtor 2.		Yes. Fill out this information feach dependent	Or Dependent's relationship to Debtor 1 or Debtor 2	-	Does dependent live with you?
Do your exp expenses of		No			
than yourself and dependents	l your	Yes			
		Monthly Expenses			
-	f a date after the ban		ss you are using this form as a s supplemental Schedule J, chec		-
	•	cash government assistan	ce if you know the value of <i>me</i> (Official Form B 106I.)		Your expenses
	or home ownership er the ground or lot. 4.	xpenses for your residence	. Include first mortgage payments	and	\$1,090.00
If not incl	uded in line 4:				
4a. Real es	state taxes				4a \$0.00

\$97.00

\$0.00

\$0.00

4b.

4c.

4d.

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

Debtor 1 Lura A. Johnson Case number (if known)
First Name Middle Name Last Name

i iist ivanie			
			Your expenses
5. Additional mortgage payme	nts for your residence, such as home equity loans	5.	\$0.00
6. Utilities:			
6a. Electricity, heat, natural ga	ns .	6a.	\$250.00
6b. Water, sewer, garbage co	llection	6b.	\$125.00
6c. Telephone, cell phone, In	ternet, satellite, and cable services	6c.	\$264.00
6d. Other. Specify: Security	System	6d	\$52.00
7. Food and housekeeping sup	plies	7.	\$400.00
8. Childcare and children's ed	ucation costs	8.	\$0.00
9. Clothing, laundry, and dry c	leaning	9.	\$75.00
10. Personal care products an	d services	10.	\$75.00
11. Medical and dental expens	ses	11.	\$75.00
12. Transportation. Include gas Do not include car payments		12.	\$202.00
13. Entertainment, clubs, recr	eation, newspapers, magazines, and books	13.	\$0.00
14. Charitable contributions a	nd religious donations	14.	\$0.00
15. Insurance. Do not include insurance ded	ucted from your pay or included in lines 4 or 20.		
15a. Life insurance		15a	\$30.00
15b. Health insurance		15b	\$0.00
15c. Vehicle insurance		15c	\$206.00
15d. Other insurance. Specify	r <u>:</u>	15d	\$0.00
16. Taxes. Do not include taxes	deducted from your pay or included in lines 4 or 20.		
Specify:		16	\$0.00
17. Installment or lease payme	ents:	10	
17a. Car payments for Vehicle		17a	\$485.00
17b. Car payments for Vehicle	e 2	17b	\$0.00
17c. Other. Specify:		17c	\$0.00
17d. Other. Specify:		17d	\$0.00
	maintenance, and support that you did not report as deducted from		\$0.00
	lle I, Your Income (Official Form 106I).	18.	
, , ,	to support others who do not live with you.		
Specify:		19.	\$0.00
20. Other real property expens 20a. Mortgages on other pro	es not included in lines 4 or 5 of this form or on Schedule I: Your Income.	00-	#0.00
20b. Real estate taxes.	oo.y	20a	\$0.00
20c. Property, homeowner's,	or rontorie incurance	20b	\$0.00
, ,,		20c	\$0.00
20d. Maintenance, repair, and		20d	\$0.00
20e. Homeowner's association	or condominant dues	20e	\$0.00

Official Form 106J Schedule J: Your Expenses page 2

Debtor 1		A.	Johnson	Case number (if known)		
	First Name	Middle N	ame Last Name			_
21. Othe	r. Specify:			_	21	\$0.00
	-	onthly expenses.		\$3,426.00		
	Add lines 4 th	· ·				\$0.00
			or 2), if any, from Official For	m 106J-2		\$3,426.00
22c. /	Add line 22a a	nd 22b. The result is your n	nonthly expenses.		22.	
23.Calcu	ılate your mo	onthly net income.				
23a. (Copy line 12 (your combined monthly inc	ome) from Schedule I.		23a	\$3,427.75
23b.	Copy your mo	onthly expenses from line 22	2 above.		23b	\$3,426.00
		monthly expenses from you	ır monthly income.			\$1.75
	The result is y	our monthly net income.			23c	
For e	example, do y	ou expect to finish paying fo	your expenses within the year your car loan within the yeause of a modification to the			
	res Expla	ain here:				

Case 19-68451-lrc Doc 1 Filed 11/15/19 Entered 11/15/19 16:19:57 Desc Main Document Page 47 of 71

Fill in this infor	mation to identify your c	ase:	
Debtor 1	Lura	A.	Johnson
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		Northern	District of Georgia
			(State)
Case number (If known)			

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1.	For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.						
	Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?				
	Creditor's name: Santander Consumer USA Description of property securing debt: 2015 Nissan Altima	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and	✓ No. Yes.				
	Creditor's name: Prestige Financial Service Inc Description of property securing debt: 2018 Mitsubishi Outlander	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	No. ✓ Yes.				
	Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and	No. Yes.				
	Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and	No. Yes.				

Debtor	Lura	A.	Johnson	Case number	(if			
1	First Name	Middle Name	Last Name	known)				
Part 2:	List Your Unexpired Perso	onal Property Leases						
informa	for any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).							
Des	cribe your unexpired personal		Will the lease be assumed?					
Les	sor's name:				☐ No ☐ Yes			
	cription of leased perty:							
Les	sor's name:				☐ No ☐ Yes			
	cription of leased perty:							
Les	sor's name:				☐ No ☐ Yes			
	cription of leased perty:							
Les	sor's name:				☐ No ☐ Yes			
	cription of leased perty:							
Les	sor's name:				☐ No ☐ Yes			
	cription of leased perty:							
Les	sor's name:				☐ No ☐ Yes			
	cription of leased perty:							
Les	sor's name:				□ No □ Yes			
	cription of leased perty:							
Part 3:	Sign Below							
Unde			intention about	any property of my estate t	that secures a debt and any personal			
🗶 /s/ Lura Johnson								
	gnature of Debtor 1		^	Signature of Debtor 2				
	ate 11/15/2019 MM/DD/YYYY			Date MM/DD/YYYY				
	IVIIVI/DD/TTTT			IVIIVI/DD/TTTT				

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

Northern District of Georgia

ln re	Lura A. Johnson	Case No.	
_	Debtor		(If known)
		Chapter	Chapter 7
	DISCLOSURE OF COMPENSATI	ON OF ATTORNEY FOR I	DEBTOR
1.	. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I compensation paid to me within one year before the filing of the rendered or to be rendered on behalf of the debtor(s) in contents.	he petition in bankruptcy, or agreed to be paid	d to me, for services
	For legal services, I have agreed to accept		\$1,865.00
	(Costs include: \$1,490.24 attorney fee, \$335.00 filing fee, \$20.00 copy	fee, \$10.00 postage fee, \$9.76 credit counseling)	
	Prior to the filing of this statement I have received		\$0.00
	Balance Due		\$1,865.00
2.	. The source of the compensation paid to me was:		
	Debtor Other (speci	ify)	
3.	. The source of the compensation paid to me is:		
	Debtor Other (speci	ify)	
4.	. I have not agreed to share the above-disclosed compensa members and associates of my law firm.	ation with any other person unless they are	
	I have agreed to share the above-disclosed compensation members or associates of my law firm. A copy of the agree the people sharing in the compensation, is attached.		
5.	In return for the above-disclosed fee, I have agreed to render le a. Analysis of the debtor's financial situation, and rendering bankruptcy;	-	
	b. Preparation and filing of any petition, schedules, state	ments of affairs and plan which may be requi	red;
	c. Representation of the debtor at the meeting of creditor		
	d. The balance due will be provided for by post-dated che	eck or ACH payments pursuant to a post-petit	tion contract.
6.	. By agreement with the debtor(s), the above-disclosed fee does	s not include the following services:	
	Motion to Sell Property - \$500.00 Application to Employ Professional/Motion to Approve Con Motion to Incur Debt/Refinance - \$300.00 Motion to Reimpose Stay - \$300.00 Motion to Vacate Dismissal/Reopen Case - \$300.00 plus of Motion to Retain Tax Refund - \$300.00 Stay Violations- \$300/per hour Representing Client in Adversary Proceeding - \$300.00/hr Representing Client in 2004 Examination - \$300.00/hr Motion to Extend Time for Reaffirmation - \$300.00	mpromise - \$300.00	

B2030 (Form 2030) (12/15)

CERTIFICATION			
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.			
11/15/2019 /s/ Willie Bruce Smith			
Date	Signature of Attorney		
	Semrad Law Firm		
	Name of law firm		

Case 19-68451-lrc Doc 1 Filed 11/15/19 Entered 11/15/19 16:19:57 Desc Main Document Page 51 of 71

Fill in this information to identify your case:					
Debtor 1	Lura	A.	Johnson		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	Northern	District of Georgia		
			(State)		
Case number (If known)					

Check if this is an
amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets
	Value of what you own
. Schedule A/B: Property (Official Form 106A/B)	\$0.00
1a. Copy line 55, Total real estate, from Schedule A/B	
1b. Copy line 62, Total personal property, from Schedule A/B	\$42,500.00
1c. Copy line 63, Total of all property on Schedule A/B	\$42,500.00
tt 2: Summarize Your Liabilities	
	Your liabilities
	Amount you owe
. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$51,053.49
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$9,713.87
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$26,170.00
Your total liabilities	\$86,937.36
	L-
art 3: Summarize Your Income and Expenses	
. Schedule I: Your Income (Official Form 106I)	\$3,427.75
Copy your combined monthly income from line 12 of Schedule I	φυ,421.10

Case 19-68451-lrc Doc 1 Filed 11/15/19 Entered 11/15/19 16:19:57 Desc Main Document Page 52 of 71

Debtor 1 Lura Johnson Case number (if known) First Name Last Name **Answer These Questions for Administrative and Statistical Records** Part 4: 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. \square 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$5,205.94 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$9,713.87 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$9,713.87

9g. Total. Add lines 9a through 9f.

Case 19-68451-lrc Doc 1 Filed 11/15/19 Entered 11/15/19 16:19:57 Desc Main Document Page 53 of 71

Fill in this information to identify your case:				
Debtor 1	Lura	A.	Johnson	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Sankruptcy Court for the:	Northern	District of Georgi (State)	<u>a</u>
Case number (If known)			()	

Official Form 106Dec

П	Check if this is an
	amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t 1: Sign Below			
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?			
	☑ No			
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).		
	Under penalty of perjury, I declare that I have read the summary a that they are true and correct.	and schedules filed with this declaration and		
×	/s/ Lura Johnson	×		
	Signature of Debtor 1	Signature of Debtor 2		
	Date 11/15/2019	Date		
	MM/DD/YYYY	MM/DD/YYYY		

UNITED STATES BANKRUPTCY COURT

Northern District of Georgia

In re:	Johnson, Lura A.	Case No.	Case No.	
	Debtor(s)			
		Chapter.	Chapter7	
	VERIFIC	CATION OF CREDITOR MAT	RIX	
TI knowledge	he above named Debtors hereby verify e.	that the attached list of creditors is tr	ue and correct to the best of their	
Date:	11/15/2019	/s/ Johnson, Lur	a A.	
		Johnson, Lura A Signature of Deb		

Case 19-68451-lrc Doc 1 Filed 11/15/19 Entered 11/15/19 16:19:57 Desc Main Document Page 55 of 71

Office of Attorney General 40 Capitol Sq Sw Atlanta, GA, 30334

Internal Revenue Service - Atl 401 West Peachtree St NW Room 1665 ATTN: Ella Johnson, M/S 334-D Atlanta, GA, 30308

Special Assistant US Attorney 401 W. Peachtree St, NW Atlanta, GA, 30308

United States Attorney's Office 75 Spring Street, S.W., Suite 600, U.S. Courthouse Atlanta, GA, 30303

Department of Justice, Tax Division 75 Ted Turner Drive SW Civil Trial Section, Southern Atlanta, GA, 30303

WORLD FINANCE CORPORAT 2640B METROPOLITAN PKWY ATLANTA, GA, 30315

PRA Receivables Management, LLC Po Box 41067 c/o Ciara Smith Norfolk, VA, 23541

Georgia Department of Revenue 1800 Century Blvd Ne Ste 17200 Atlanta, GA, 30345

Internal Revenue Service PO Box 7346 Philadelphia, PA, 19101

Santander Consumer USA PO Box 961245 Fort Worth, TX, 76161

Alliance Capital Management 1 North Lexington Ave White Plains, NY, 10601

Case 19-68451-lrc Doc 1 Filed 11/15/19 Entered 11/15/19 16:19:57 Desc Main Document Page 56 of 71

CAPITAL ONE BANK USA N.A. P. O Box 30281 Salt Lake City, UT, 84130

First Investors Financial Service Inc 380 Interstate North Parkway 3rd Floor Atlanta, GA, 30339

Quantum3 Group LLC PO Box 788 Kirkland, WA, 98083

Prestige Financial Service Inc 1420 South 500 West Salt Lake City, UT, 84115

Gwinnett Medical Center PO Box 116228 Atlanta, GA, 30368

Access One PO Box 410806 Charlotte, NC, 28241

Atlanta Heart Specialist 2665 North Decatur Road Suite 320 Decatur, GA, 30033

Comcast PO Box 301 Southeastern, PA, 19398

Eastside heart and vascular LLC PO Box 668 Brentwood, TN, 37024

Medicredit Three City Place Drive Ste 690 Saint Louis, MO, 63141

Progressive Leasing 256 West Data Drive Draper, UT, 84020

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1.717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans.
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Fill in this infor	mation to identify your c	case:							
							eck one box o m 122A-1Sup	only as directed in t	this form and in
Debtor 1	Lura First Name	A. Middle Name		Johnson Last Name			III 122A-10u	op.	
Debtor 2	i iiot ivaino	Wildale Name	,	Lastitaino			1. There is no	presumption of abu	ise.
(Spouse, if filing)	First Name	Middle Name		Last Name			abuse applies	ation to determine if a will be made under	Chapter 7
United States E	Bankruptcy Court for the:	Northern	Distr	rict of Georgi (State)	a		Means Test (Calculation (Official Fo	orm 122A-2).
Case number (If known)				(Glate)		□		s Test does not apply ary service but it coul	
							Check if this	is an amended filing	
Official	Form 122A-	1							
Chapter	7 Statement	_ of Your Curr	ent Mo	onthly l	ncor	ne			12/15
needed, attach write your nam consumer deb (Official Form	e and accurate as possing a separate sheet to the separate sheet to the separate sheet to the separate sheet to the separate sheet sheet and case of qualifying the separate Your Current leads to the separate Your Current leads to the separate sheet she	is form. Include the I known). If you believe ing military service, o form.	ine number that you a	r to which th re exempted	ne additi d from a	onal information of	on applies. O	n the top of any ad use you do not hav	ditional pages, e primarily
	ur marital and filing sta	-							
✓ Not ma	arried. Fill out Column A,	lines 2-11.							
	d and your spouse is fili		oth Column	ns A and B, lin	nes 2-11	<u>-</u>			
	d and your spouse is NC								
	ing in the same househ	nold and are not legal	lv separate	e d. Fill out bo	th Colun	nns A and B. lin	ies 2-11.		
Liv	ving separately or are le	egally separated. Fill o	out Column	A, lines 2-11	; do not	fill out Column	B. By checkin	•	are
	ouse are living apart for re		٠,	•			• •		
bankru August Fill in th	he average monthly inc ptcy case. 11 U.S.C. § 1 31. If the amount of your e result. Do not include a from that property in one	01(10A). For example, r monthly income varied ny income amount mo	if you are fild during the re than once	ling on Septe 6 months, a e. For examp	mber 15 add the in le, if both	the 6-month p come for all 6 r spouses own	period would b months and di the same renta	e March 1 through vide the total by 6.	
						Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
	s wages, salary, tips, bo	onuses, overtime, and	commission	ons		\$5,205.94			
, , ,	nd maintenance payme	ents. Do not include pa	yments fron	n a spouse if		<u>\$0.00</u>			
4. All amoun expenses	ts from any source which	ch are regularly paid	for househo	old					
of you or y contribution from an un and roomm	our dependents, includins ns married partner, members nates. Include regular con	s of your household, yo	our depende	ents, parents,		\$0.00			
not filled in. Do	not include payments yo	ou listed on line 3.							
5. Net incom or farm	ne from operating a bus	iness, profession,	Debtor 1	Debtor 2					
Gross recei	pts (before all deductions	·)	\$0.00						
-	d necessary operating ex	•	-\$0.00		сору				
	y income from a business		\$0.00		here→	\$ <u>0.00</u>			
	e from rental and other	, , ,	Debtor 1	Debtor 2					
	pts (before all deductions		\$0.00						
_	d necessary operating ex		-\$0.00		сору				
	y income from rental or o		\$0.00		here→	\$0.00			
7. Interest, c	lividends, and royalties					\$0.00			

Debtor 1 Lura First Name	A. Middle Name	Johnson Last Name	Case number	(if known)		
			Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
8. Unemployment compensation	ontond that the amount wa	societed was a banefit	\$0.00			
Do not enter the amount if you c under the Social Security Act. Ins	tead, list it here:	↓				
For your spouse		\$0.00 \$0.00				
9. Pension or retirement income. benefit under the Social Security do not include any compensation the United States Government in injury or disability, or death of a nany retired pay paid under chapte extent that it does not exceed the otherwise be entitled if retired under that title.	Act. Also, except as stated n, pension, pay, annuity, o connection with a disabili nember of the uniformed ser er 61 of title 10, then inclu- e amount of retired pay to	in the next sentence, or allowance paid by ty, combat-related services. If you received de that pay only to the which you would	\$ <u>0.00</u>			
10.Income from all other sources amount. Do not include any bene payments received as a victim of international or domestic terrorism allowance paid by the United Stat combat-related injury or disability services. If necessary, list other subelow.	efits received under the So a war crime, a crime again n; or compensation, pensi tes Government in connect, or death of a member of	cial Security Act; st humanity, or on, pay, annuity, or stion with a disability, the uniformed				
Total amounts from separate pag	use if any		+\$0.00		+	
	•			1.1		=
11. Calculate your total current each	-	_	\$ <u>5,205.94</u>	+		<u>\$5,205.94</u>
column. Then add the total for	Column A to the total for	Column B.	<u> </u>			Total current
Part 2: Determine Whether the	ne Means Test Annlie	se to Vou				monthly income
12. Calculate your current month						
12a. Copy your total current mor				Copy line	e 11 here →	\$5,205.94
Multiply by 12 (the number 12b. The result is your annual inc	- · · · · · · · · · · · · · · · · · · ·	rm.			12b.	X 12 \$62,471.28
40 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		E-lless there also				
13 Calculate the median family in	come that applies to yo	Georgia				
Fill in the state in which you live.		1				
Fill in the number of people in yo						
Fill in the median family income f household.	or your state and size of				13.	\$49,236.00
To find a list of applicable mediar instructions for this form. This lis 14. How do the lines compare?						
14a. Line 12b is less than or Go to Part 3.	equal to line 13. On the t	op of page 1, check box	1, There is no presumpt	ion of ab	use.	
14b. Line 12b is more than Go to Part 3 and fill out	ine 13. On the top of pag t Form 122A-2.	e 1, check box 2, The pr	esumption of abuse is de	etermined	by Form 122A-2.	
Part 3: Sign Below						
By signing here, I declare under	penalty of perjury that the	information on this state	ement and in any attachn	nents is tr	rue and correct.	
.		40				
/s/ Lura Johnson Signature of Debtor 1			Signature of Debtor 2			_
Date 11/15/2019 MM/DD/YYYY			Date 11/15/2019 MM/DD/YYYY			
Official Formeh&&edline 14a, do N If you checked line 14b, fill ou			Current Monthly Income	·		page 2

Case 19-68451-lrc Doc 1 Filed 11/15/19 Entered 11/15/19 16:19:57 Desc Main Document Page 63 of 71

Fill in this infor	mation to identify your c	ase:		Check the appropriate box as directed
Debtor 1	Lura	A.	Johnson	in lines 40 or 42:
Debtor 2	First Name	Middle Name	Last Name	According to the calculations required by this Statement:
(Spouse, if filing)	First Name	Middle Name	Last Name	1. There is no presumption of abuse.
United States E	Bankruptcy Court for the:	Northern	District of Georgia (State)	2. There is a presumption of abuse.
Case number (If known)			· ,	Check if this is an amended filing

Official Form 122A-2

Chapter 7 Means Test Calculation

04/16

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

. Copy your total current monthly	Copy line 11 from Official Form 12	2A-1 here →	\$5,205.94
Did you fill out Column B in Part 1 of Form 122A-1? No. Fill in \$0 for the total on line 3.			
Yes. Is your spouse filing with you?			
No. Go to line 3.			
Yes. Fill in \$0 for the total on line 3.			
Adjust your current monthly income by subtracting any part of you of you or your dependents. Follow these steps:	r spouse's income not used to pay fo	or the household ex	penses
On line 11, Column B of Form 122A-1, was any amount of the income regularly used for the household expenses of you or your dependents?	you reported for your spouse NOT		
	you reported for your spouse NOT		
regularly used for the household expenses of you or your dependents?	you reported for your spouse NOT		
regularly used for the household expenses of you or your dependents? No. Fill in 0 for the total on line 3.	you reported for your spouse NOT Fill in the amount yo	ou	
regularly used for the household expenses of you or your dependents? No. Fill in 0 for the total on line 3. Yes. Fill in the information below:	Fill in the amount yo	n	
regularly used for the household expenses of you or your dependents? No. Fill in 0 for the total on line 3. Yes. Fill in the information below: State each purpose for which the income was used For example, the income is used to pay your spouse's tax debt or	Fill in the amount you to support are subtracting from	n	→ - \$0.00

	Lura First Na	ame	A. Middle Name	Johnson Last Name	Ca	se number <i>(if knov</i>	vn)	
rt 2:			ictions from Your In					
11 2.	Calcu	diate roui bedu	icuons irom rour ir	leonie				
ans	wer the	e questions in line	es 6-15. To find the IRS	l and Local Standards for standards for standards, go online until the bankruptcy clerk	sing the link sp			r
actu	ıal expei	nses if they are high	her than the standards. I	ardless of your actual exp Do not deduct any amou ubtracted from income in	nts that you subt	racted from your		
If yo	our expe	enses differ from m	onth to month, enter the	e average expense.				
Whe	enever tl	his part of the form	refers to you, it means	both you and your spous	se if Column B of	Form 122A-1 is	filled in.	
5.	The nu	umber of people u	ised in determining yo	ur deductions from inco	ome			
	plus th		dditional dependents wh	d as exemptions on your nom you support. This no			1	
Nat	ional S	tandards	You must use the IRS	National Standards to ans	wer the question	s in lines 6-7.		
6.	Food,	clothing, and other	ar itams: Using the num					
	in the		ood, clothing, and other	nber of people you entere items.	ed in line 5 and th	ie IRS National S	tandards, fill	\$727.00
7.	Out-of	dollar amount for for for for for for for for formal fo	are allowance: Using the rout-of-pocket health coare 65 or older-becaus		entered in line 5 e is split into two her IRS allowanc	and the IRS Nation categories-peoper for health care of	onal Standards, lle who are	\$727.00
7.	Out-offill in the under actual	dollar amount for for for for for for for for formal fo	are allowance: Using the rout-of-pocket health coare 65 or older-becauser than this IRS amount,	ne number of people you are. The number of people e older people have a hig	entered in line 5 e is split into two her IRS allowanc	and the IRS Nation categories-peoper for health care of	onal Standards, lle who are	\$727.00
7.	Out-of fill in the under actual	dollar amount for	are allowance: Using the rout-of-pocket health coare 65 or older-becauser than this IRS amount,	items. ne number of people you are. The number of people older people have a hig you may deduct the add	entered in line 5 e is split into two her IRS allowanc	and the IRS Nation categories-peoper for health care of	onal Standards, lle who are	\$727.00
7.	Out-of fill in the under actual of People 7a.	dollar amount for for for form of the dollar amount for 65 and people who expenses are higher than the dollar amount for 65 and people who expenses are higher for the dollar for for for the dollar for for for for for for for for for fo	are allowance: Using the rout-of-pocket health coor are 65 or older-becauser than this IRS amount, as years of age.	items. ne number of people you are. The number of people older people have a hig you may deduct the add	entered in line 5 e is split into two her IRS allowanc	and the IRS Nation categories-peoper for health care of	onal Standards, lle who are	\$727.00
7.	Out-of fill in the under actual People 7a. C	f-pocket health can be dollar amount for form of the dollar amount for 65 and people who expenses are higher than the dollar amount for form of people who are under 60 are un	are allowance: Using the rout-of-pocket health co are 65 or older-becauser than this IRS amount, 65 years of age the care allowance per per who are under 65	items. ne number of people you are. The number of people older people have a hig you may deduct the add	entered in line 5 e is split into two her IRS allowanc	and the IRS Nation categories-people for health care on line 22.	onal Standards, lle who are	\$727.00
7.	Out-of fill in the under actual People 7a. Co. S. Toc. S.	f-pocket health cannot be defined and people who expenses are higher than the definition of the defini	are allowance: Using the rout-of-pocket health coare 65 or older-becauser than this IRS amount, 65 years of age the care allowance per per who are under 65 ne 7a by line 7b.	ne number of people you are. The number of people e older people have a hig you may deduct the add son \$55.00	entered in line 5 e is split into two her IRS allowand itional amount or	and the IRS Nation categories-peoper for health care of	onal Standards, lle who are	<u>\$727.00</u>
7.	Out-of fill in the under actual of the people of the peopl	f-pocket health cane dollar amount for forme dollar amount fo 65 and people who expenses are higher who are under 60 Dut-of-pocket health Number of people was bubtotal. Multiply line who are 65 year	are allowance: Using the rout-of-pocket health coordinates are than this IRS amount, as years of age the care allowance per per who are under 65 are 7a by line 7b.	ne number of people you are. The number of people e older people have a hig you may deduct the add son \$55.00 1 \$55.00	entered in line 5 e is split into two her IRS allowand itional amount or	and the IRS Nation categories-people for health care on line 22.	onal Standards, lle who are	\$727.00
7.	Out-of fill in the under actual of the people of the peopl	f-pocket health can be dollar amount for form of the dollar amount for 65 and people who expenses are higher of the dollar amount for 65 and people who are under 65 ut-of-pocket health of the dollar form of people who are 65 year out-of-pocket health out-of-pocket health out-of-pocket health	are allowance: Using the rout-of-pocket health can be are 65 or older-becauser than this IRS amount, 65 years of age the care allowance per per who are under 65 the 7a by line 7b. Its of age or older the care allowance per per the care allowance per per the router 65	titems. The number of people you are. The number of people e older people have a hig you may deduct the add The number of people you are. The number of people have a hig you may deduct the add The son \$55.00 The statement of people you are. The number of people you are the number of people you are. The number of people you are not are not are. The number of people you are not are. The number of people you are not are. The number of people you are not are n	entered in line 5 e is split into two her IRS allowand itional amount or	and the IRS Nation categories-people for health care on line 22.	onal Standards, lle who are	\$727.00
7.	Out-of fill in the under actual People 7a. C. 7b. N. 7c. S. People 7d. C. 7e. N.	dollar amount for for form of the dollar amount for 65 and people who expenses are higher of people who are under 60 Dut-of-pocket health Number of people who are 65 year Dut-of-pocket health Number of people who are 65 year Dut-of-pocket health Number of people who are 65 year Dut-of-pocket health Number of people who are 65 year Dut-of-pocket health Number of people who are 65 year Number of	are allowance: Using the rout-of-pocket health of are 65 or older-becauser than this IRS amount, 65 years of age the care allowance per per who are under 65 the 7a by line 7b. The of age or older the care allowance per per the care 65 or older	titems. The number of people you are. The number of people e older people have a hig you may deduct the add The number of people you are. The number of people you are number of people you are. The number of people you are number of people you are. The number of people you are number of pe	entered in line 5 e is split into two her IRS allowand itional amount or Copy here	and the IRS Nation categories-people for health care on line 22.	onal Standards, lle who are	<u>\$727.00</u>
7.	Out-of fill in the under actual People 7a. C. 7b. N. 7c. S. People 7d. C. 7e. N.	f-pocket health can be dollar amount for form of the dollar amount for 65 and people who expenses are higher of the dollar amount for 65 and people who are under 65 ut-of-pocket health of the dollar form of people who are 65 year out-of-pocket health out-of-pocket health out-of-pocket health	are allowance: Using the rout-of-pocket health of are 65 or older-becauser than this IRS amount, 65 years of age the care allowance per per who are under 65 the 7a by line 7b. The of age or older the care allowance per per the care 65 or older	titems. The number of people you are. The number of people e older people have a hig you may deduct the add The number of people you are. The number of people have a hig you may deduct the add The son \$55.00 The statement of people you are. The number of people you are the number of people you are. The number of people you are not are not are. The number of people you are not are. The number of people you are not are. The number of people you are not are n	entered in line 5 e is split into two her IRS allowand itional amount or	and the IRS Nation categories-people for health care on line 22.	onal Standards, lle who are	\$727.00

Case 19-68451-lrc Doc 1 Filed 11/15/19 Entered 11/15/19 16:19:57 Desc Main Document Page 65 of 71

Debtor 1 Lura Johnson Case number (if known) First Name Middle Name Last Name **Local Standards** You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill in the dollar \$521.00 amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount listed \$982.00 for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of the creditor Average monthly payment Repeat this Total average monthly payment \$0.00 Copy -\$0.00 amount on here→ line 33a. 9c. Net mortgage or rent expense. Copy \$982.00 \$982.00 Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this amount is less than \$0, enter \$0. 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the \$0.00 calculation of your monthly expenses, fill in any additional amount you claim. Explain whv: 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. 0. Go to line 14. 1. Go to line 12. 2 or more. Go to line 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the operating \$240.00 expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area.

Case 19-68451-lrc Doc 1 Filed 11/15/19 Entered 11/15/19 16:19:57 Desc Main Document Page 66 of 71

Debtor 1 Lura Johnson Case number (if known) First Name Last Name Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. Describe Vehicle 1: 2015 Nissan Altima Vehicle 1 13a. Ownership or leasing costs using IRS Local Standard. \$508.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you filed for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment Santander Consumer USA \$553.52 Repeat this Copy here→ Total average monthly payment \$553.52 - \$553.52 amount on line 33b. Copy net 13c. Net Vehicle 1 ownership or lease expense Vehicle 1 \$0.00 Subtract line 13b from line 13a. If this amount is less than \$0, enter \$0. \$0.00 expense here → Vehicle 2 Describe Vehicle 2: 13d. Ownership or leasing costs using IRS Local Standard. \$508.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment Prestige Financial Service Inc \$481.69 Repeat this Copy here→ Total average monthly payment \$481.69 - \$481.69 amount on line 33c Copy net 13f. Net Vehicle 2 ownership or lease expense Vehicle 2 Subtract line 13e from line 13d. If this amount is less than \$0, enter \$0. expense \$26.31 \$26.31 here → 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the Public Transportation expense allowance regardless of whether you use public transportation. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct \$0.00 a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the

IRS Local Standard for Public Transportation.

Case 19-68451-lrc Doc 1 Filed 11/15/19 Entered 11/15/19 16:19:57 Desc Main Document Page 67 of 71

Debtor 1 Lura Johnson Case number (if known) First Name Middle Name Last Name Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories. 16. Taxes:The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-\$1,312.20 employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes. 17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union \$151.14 dues, and uniform costs. Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. 18. Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filling together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on \$0.00 your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. \$0.00 Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. **Education:** The total monthly amount that you pay for education that is either required: as a condition for your job. or \$0.00 for your physically or mentally challenged dependent child if no public education is available for similar services. 21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. \$0.00 Do not include payments for any elementary or secondary school education. 22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. \$0.00 Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25. 23. Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the +\$0.00extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted. 24. Add all of the expenses allowed under the IRS expense allowances. \$4,014.65 Add lines 6 through 23.

Debtor 1		a t Name	A. Middle Name	Johnson Last Name	Case number (if known)	
٨٨				nal deductions allowed by the	Moone Teet	
Auc	aitioi	nal Expense Deductions		ude any expense allowances li		
25				_	ses. The monthly expenses for health insurance, for yourself, your spouse, or your	
	Н	lealth insurance		\$402.77		
	D	Disability insurance		\$0.00		
	Н	lealth savings account		\$0.00		
	Т	otal		\$402.77	Copy total here→	\$402.77
	D	Oo you actually spend this total	al amount?			
		No. How much do you ac	tually spend?			
	Ŀ	✓ Yes				
26	p: m	ay for the reasonable and nec	essary care and su nily who is unable t	pport of an elderly, chronically to pay for such expenses. The	e actual monthly expenses that you will continue to ill, or disabled member of your household or se expenses may include contributions to an	\$0.00
27				nably necessary monthly expention and Services Act or other f	ses that you incur to maintain the safety of you ederal laws that apply.	\$0.00
	В	By law, the court must keep th	e nature of these e	xpenses confidential.		
28	. А	additional home energy cos	ts. Your home ene	rgy costs are included in your i	nsurance and operating expenses on line 8.	
		you believe that you have ho the excess amount of home		nat are more than the home en	ergy costs included in expenses on line 8, then fill	
		ou must give your case trustes reasonable and necessary.	ee documentation o	of your actual expenses, and yo	ou must show that the additional amount claimed	\$0.00
29	cł				e monthly expenses (not more than \$160.42* per old to attend a private or public elementary or	
		ou must give your case truste easonable and necessary and		, , ,	ou must explain why the amount claimed is	\$0.00
	*	Subject to adjustment on 4/0	1/19, and every 3	years after that for cases begur	n on or after the date of adjustment.	
30	th		ng allowances in the	e IRS National Standards. That	ctual food and clothing expenses are higher than amount cannot be more than 5% of the food and	\$0.00
		o find a chart showing the material comments. This chart may also be a			e link specified in the separate instructions for this	
	Y	ou must show that the addition	onal amount claime	ed is reasonable and necessary	r.	
31		Continuing charitable contri estruments to a religious or ch			ontribute in the form of cash or financial	+\$0.00
32	. А	dd all of the additional exp	ense deductions.			
	A	dd lines 25 through 31.				\$402.77

Case 19-68451-lrc Doc 1 Filed 11/15/19 Entered 11/15/19 16:19:57 Desc Main Document Page 69 of 71

Debtor 1 Lura Johnson Case number (if known) First Name Last Name Middle Name **Deductions for Debt Payment** 33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e. The monthly expenses for health insurance, disability To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Average monthly Mortgages on your home: payment 33a. Copy line 9b here \$0.00 Loans on your first two vehicles: \$553.52 33b. Copy line 13b here. \$481.69 33c. Copy line 13e here. 33d. List other secured debts: Name of each creditor for other Identify property that Does payment secured debt secures the debt include taxes or insurance? Copy total \$1,035.21 \$1,035.21 33e. Total average monthly payment. Add lines 33a through 33d. here→ Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? No. Go to line 35. Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor **Identify property Total cure** Monthly cure that amount amount secures the debt \$0.00 $\div 60 =$ Santander Consumer USA 2015 Nissan Altima +\$0.00 \$0.00 ÷ 60 = 2018 Mitsubishi +\$0.00 Prestige Financial Service Inc Outlander \$0.00 Copy total \$0.00 Total here→ Do you owe any priority claims such as a priority tax, child support, or alimony that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims \$0.00 \$0.00 $\div 60 =$

Debtor 1		ama.	A.		nnson et Nome		Case number (ii	f known)		
	First Na	ame	Middle Name	Las	st Name					
36	For	you eligible to file a cas more information, go onlir cs may also be available at	ne using the link for E	Bankrupto		ed in the se	eparate instruction	ons for this form.	Bankruptcy	
		No. Go to line 37.								
	V	Yes. Fill in the following in	formation.							
		Projected monthly plan	payment if you were	filing und	ler Chapter 13		\$1.7	75		
		Current multiplier for yo of the United States Cor Executive Office for Unit	urts (for districts in Al	abama ar	d North Carolin		е	0663		
		To find a list of district r specified in the separate bankruptcy clerk's office	instructions for this	-	-	_				
		Average monthly admin	istrative expense if yo	u were fi	ling under Chap	ter 13	\$68	3.92	Copy total here→	\$68.92
37.	Add a	all of the deductions for	debt payment.							
	Add li	nes 33e through 36.							5	\$1,104.13
										_
To	otal De	ductions from Income								
38.	Add	all of the allowed deduc	tions.							
		r line 24, All of the expense nse allowances	es allowed under IRS		\$4,014.65					
	Сору	line 32, All of the addition	nal expense deductio	าร	\$402.77					
	Copy	/ line 37, All of the deducti	ons for debt paymen	t	\$1,104.13		1			
	ı			eductions			Copy total he	re		\$5,521.55
Part 3:	Dete	rmine Whether There	ls a Presumption	n of Ab	use					
39.	Calc	ulate monthly disposabl	e income for 60 mo	nths						
	39a.	Copy line 4, adjusted cur	rent monthly income	•	\$5,205.94					
	39b.	Copy line 38, Total dedu	ctions		\$5,521.55					
	39c.	Monthly disposable inco Subtract line 39b from lin		(b)(2).	(\$315.61)		Copy here→	(\$315.61)		
		For the next 60 months	(5 years)					x 60		
	39d.	Total. Multiply line 39c b	у 60					(\$18,936.60)	Copy here→	(\$18,936.60)
40.	Find	out whether there is a p	presumption of abus	se. Check	the box that ap	plies:			L	
		The line 39d is less than			·	•	1, <i>There is no p</i>	oresumption of ab	ouse. Go to Part 5	
	Ħ.	The line 39d is more that out Part 4 if you claim spe	n \$12,850*. On the	op of pag	ge 1 of this form		•	·-		
		The line 39d is at least \$				line 41.				
		* Subject to adjustment					filed on or afte	er the date of ac	djustment.	

Debtor 1		A.	Johnson	Case number (if known)	
	First Nam	e Middle Name	Last Name		
41.	41a.	Fill in the amount of your total nonpri Your Assets and Liabilities and Certain So you may refer to line 3b on that form	-		
				x .25	
	41b.	25% of your total nonpriority unsecur Multiply line 41a by 0.25	ed debt. 11 U.S.C. § 707(b)	(2)(A)(i)(l).	Copy here →
42.	is eno	nine whether the income you have left ugh to pay 25% of your unsecured, nor the box that applies:	_	llowed deductions	
		ne 39d is less than line 41b. On the top to Part 5.	of page 1 of this form, check	box 1, There is no presumption of abuse.	
		ne 39d is equal to or more than line 41 abuse. You may fill out Part 4 if you claim		is form, check box 2, There is a presumption go to Part 5.	
Part 4:	Give D	etails About Special Circumstanc	es		
		iny special circumstances that justify ternative? 11 U.S.C. § 707(b)(2)(B).	additional expenses or adju	ustments of current monthly income for w	hich there is no
✓ 1	No. Go to	Part 5.			
		the following information. All figures sho ach item. You may include expenses you		hly expense or income adjustment	
	adjus	must give a detailed explanation of the spo tments necessary and reasonable. You m I expenses or income adjustments.		•	
	Give	a detailed explanation of the special of	circumstances	Average monthly e or income adjustm	•
Part 5:	Sign B	elow			
	By si	ining here. I declare under penalty of perio	ury that the information on thi	s statement and in any attachments is true an	nd correct
	<i>D</i> , 0.	ining floro, i doord a floor portatly or porta	ny tractire information on the	o otatomone and in any attachmente to true ar	14 5511551.
	_	/s/ Lura Johnson	<u> </u>		
	8	ignature of Debtor 1	Się	gnature of Debtor 2	
	Г	ate 11/15/2019 MM/DD/YYYY	Da	mte MM/DD/YYYYY	